



Colorado Department
of Public Health
and Environment

CYSHCN Data System

User Manual

May 2012

Version 2 – May 1, 2012

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Introduction

The *CYSHCN Data System* is the data system for the Health Care Program for Children with Special Needs (HCP). HCP Staff from local public health agencies that have contracts with the Colorado Department of Public Health and Environment (CDPHE) use this system to enter data for each child receiving HCP Care Coordination. The HCP state and local offices use the data for assessment, planning, evaluation, reporting and, in some cases, contract monitoring. Entering care coordination data in the *CYSHCN Data System* is an HCP contract requirement.

How to Use the CYSHCN Data System User Manual

It is important for new users of the *CYSHCN Data System* to review this manual before entering data. This manual is a guide to navigating the data system and entering data. An archived webinar training presentation is available to learn the *CYSHCN Data System* and to understand the HCP Care Coordination Model. All staff must take the training on both the data system and the HCP Care Coordination Model in order to obtain a user name and password for the *CYSHCN Data System*.

The training environment is located at <https://www.phitraining.dphe.state.co.us/nonauthenticated/>.

HINT: If you have difficulty reading the text or screens in this manual, use the zoom on your tool bar under “View” to increase the size of the text and screens for viewing.

You may call the Help Desk from 7:30 AM to 4:30 PM. You may have to leave a message, allow 1 business day for your call to be returned. The Help Desk supports with passwords, getting started and answers questions about entering data.

GETTING STARTED

Welcome to the *CYSHCN Data System* (CYSHCN is pronounced “shin”). The program runs on Microsoft Windows XP or Windows 7.

Open your internet browser (MS Internet Explorer 7 or higher), and go to:

<https://www.phi.dphe.state.co.us/Nonauthenticated/IDS/default.aspx> to access the *Colorado Department of Public Health and Environment Health Informatics Data Systems* home page. The data system is web-based, so you can access it from any computer with internet capability (as outlined in Security and Confidentiality Agreement). Using an IBM-compatible browser (e.g. *Firefox*) allows the program to run reliably. If you prefer *Safari*, for example, which is not IBM compatible, it may not run properly. The Colorado Department of Public Health and Environment recommends using Internet Explorer 8 or greater as a Web Browser.

Colorado Department of Public Health and Environment Health Informatics Data System Home Page:

COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
HEALTH INFORMATICS DATA SYSTEMS

HOME CONTACT ABOUT SITEMAP

Whom do we serve?

- ▶ CYSHCN -Children and Youth With Special Health Care Needs
- ▶ Newborn Hearing
- ▶ Newborn Metabolic
- ▶ TCH - Metabolic Clinic
- ▶ TCH - Sickle Cell Clinic
- ▶ Family Planning
- ▶ ECast

LEARN MORE ABOUT OUR PROGRAMS

NEED MORE INFORMATION? CONTACT OUR STAFF

NEED ACCESS TO YOUR PROGRAM? REQUEST HERE

PROGRAM INFORMATION

To **log in**, please use the right hand login box. All programs have links below.

Programs Supported

- Children and Youth with Special Health Care Needs
- Newborn Hearing
- Newborn Metabolic
- CHC Metabolic Clinic
- CHC Sickle Cell Clinic

ACCESS YOUR PROGRAM

Username:

Password:

LOG IN

Can't access your account?
[Request a New User Account](#)

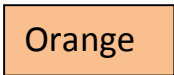


By logging on to this site you agree to abide by the Security Policy.

The Children and Youth with Special Health Care Needs (CYSHCN) Data System collects data related to HCP Care Coordination services.

The *CYSHCN Data System* is one of the data systems in the Colorado Department of Public Health and Environment's Integrated Data System (IDS).

Moving Through the Data System

Shortcuts and Helpful Hints

- **Required Data** - Required data fields in the data system have an  background. If you try to save the screen without first completing the orange fields you will receive the following message either on the screen itself or in a pop-up box: **Required Entry: Required Field Missing [name of missing field]**.
- Use the **Tab** key or your mouse to move through the system. Do not use the directional arrows on your keyboard, as using them will take you back to the home page.
- **F11** – To make the screen larger, you may want to display it in “Full Screen” mode. Click on F11 to hide the web browser toolbars. When you need to access the toolbars again, click on F11 again to return to the normal view.
- **NEVER** use Toolbar back  and forward  arrows at the top left of your screen. Using the arrows will close the *CYSHCN Data System*. You will need to re-open the system and log in again to continue entering data.
- The *CYSHCN Data System* times out after a period of inactivity. If you sign back into the system within 20 minutes from the time the system locks you out, you will still be on the screen you were last working on. If the time out period is greater than 20 minutes, you will return to the system’s Home screen.
- When you have finished your session on the *CYSHCN Data System*, log out of the system by clicking on **Logout**.

Request a New User Account

Before you can enter data, you will need to request a new user account by clicking on the ***Request a New User Account*** text below the log in box shown below. Click on **Children and Youth with Special Health Care Needs** at the top of the **Programs Supported** to begin. In this manual, we show you screen examples with descriptions of the information to be entered on each screen.

COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
HEALTH INFORMATICS DATA SYSTEMS

HOME CONTACT ABOUT SITEMAP

Whom do we serve?

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- ▶ TCH - Sickle Cell Clinic
- ▶ Family Planning
- ▶ ECast

LEARN MORE ABOUT OUR PROGRAMS

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NEED ACCESS TO YOUR PROGRAM? REQUEST HERE

PROGRAM INFORMATION

To **log in**, please use the right hand login box. All programs have their own informational pages and can be accessed with the below links.

Programs Supported

- [Children and Youth with Special Health Care Needs](#)
- [Newborn Hearing](#)
- [Newborn Metabolic](#)
- [CHC Metabolic Clinic](#)
- [CHC Sickle Cell Clinic](#)

ACCESS YOUR PROGRAM

Username:

Password:

LOG IN

Can't access your account?
[Request a New User Account](#)

By logging on to this site you agree to abide by Security Policy.

After you click on **Request a New User Account** shown on the screen above, the following screen pops up.

REQUEST A NEW USER ACCOUNT

Required Information for Account Request

Last Name:

First Name:

Middle Name:

E-mail:

Security Question:

Security Answer:

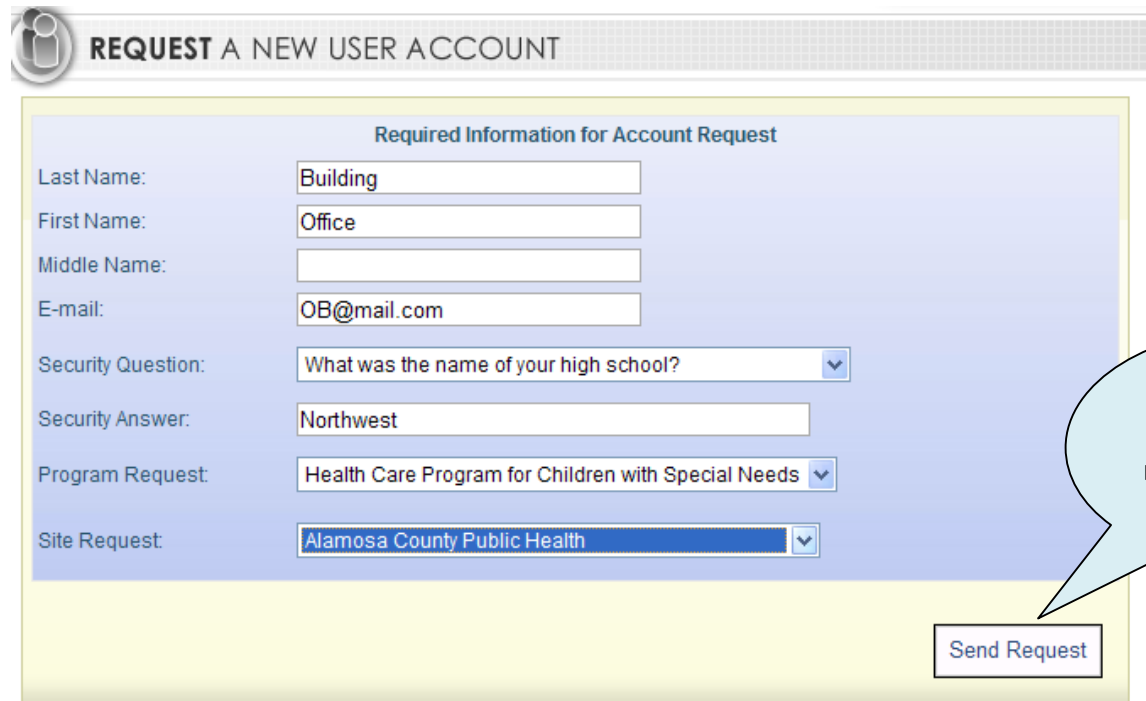
Program Request:

Site Request:

Always select this program.

Fill in all the spaces on the form. Select a **Security Question** from the drop down list and type your answer in the **Security Answer** box.

Select "**Health Care Program for Children with Special Needs**" from the Program Request drop down list.



REQUEST A NEW USER ACCOUNT

Required Information for Account Request

Last Name:

First Name:

Middle Name:

E-mail:

Security Question:

Security Answer:

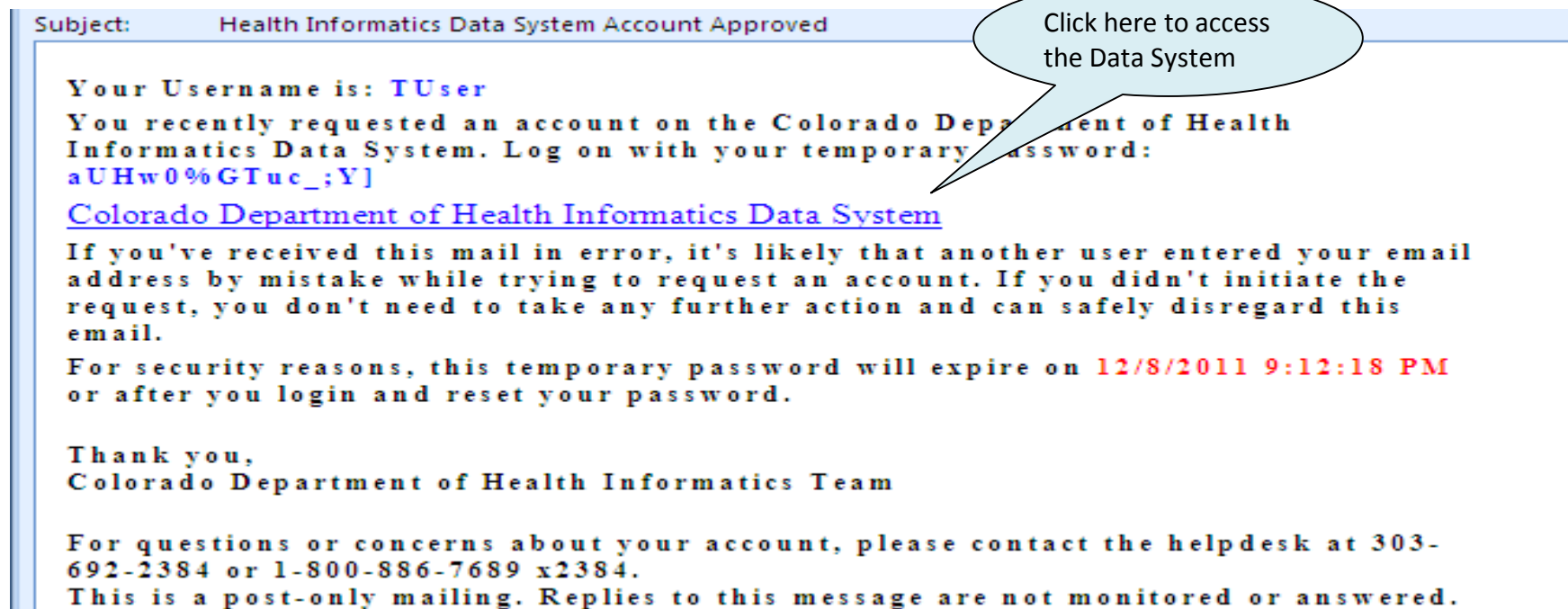
Program Request:

Site Request:

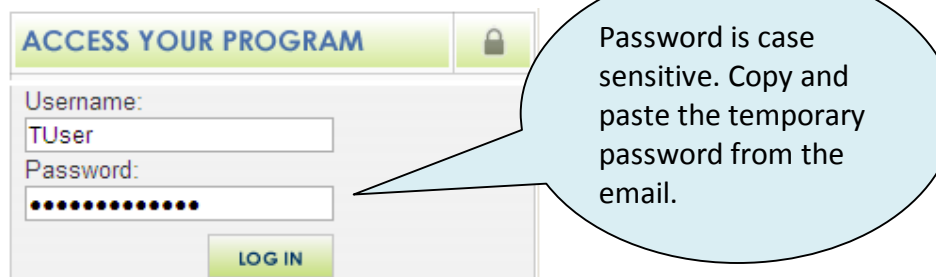
Select your primary site from the drop down list. Staff that enters data for more than one HCP site can send an email with those site names to the Data Coordinator at Dale.Knochenmus@state.co.us. A future enhancement to CYSHCN will automate this process.

Click on **Send Request**

When the CYSHCN Data Coordinator has approved your request, an email message with a title of *Health Informatics Data System Account Approved* will be sent to the email address you entered.



Once you click the Data System link on the email, it takes you the Data System Home Page. Start entering your initial login.



The **CDPHE Data Security, Use and Confidentiality Agreement** shown below will appear.

Colorado Department of Health & Environment - Data Security, Use and Confidentiality Agreement

In consideration of my access to the Colorado Department of Public Health and Environment secure Web site and information, I agree to the following.

I understand that I am responsible for making every effort to prevent unauthorized users from gaining access to or using my user ID and password. I also agree to make every reasonable effort to prevent use of a computer for illegal or unethical purposes by all users, authorized or not.

I agree to immediately report any suspected or actual unauthorized access to the Colorado Department of Public Health and Environment point of contact that manages the information.

I will not share my password with any other person.

I will not leave my password around my computer or where another person might easily locate it.

I will change my password periodically and if I suspect it has been compromised. I will set up my passwords according to department guidelines for length and content.

I understand that this is a "shared" environment. My fellow users and patients may be affected or confidentiality compromised by the activities of other users. Preventing such activity is the shared responsibility of all users.

I agree to access only the information I need to do my job and not to access or attempt to access files that I am not authorized to use. I will not "browse" or otherwise use files or programs that exceed what is the minimum necessary to do my job. My use and disclosures of information will be consistent with those permitted by the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other applicable laws and rules.

I agree not to discuss confidential information or to provide copies of confidential reports, regardless of how or where acquired, to family members, friends, professional colleagues, other employees, other clients or any other person unless such person has been authorized to have access to that information. If unsure who is authorized to access the information, I will check with my supervisor or the department point of contact who manages the information.

I understand that for audit or system security purposes, the department may monitor all my activity.

I understand that the department may revoke my access at any time, with or without cause.

I understand that any violation of federal, state, local or the program's confidentiality requirements or this Agreement will be considered a breach of my obligations and may result in disciplinary action, up to and including termination of employment, termination of contractual relationship and other remedies allowed by law during or after my employment or work with the data systems. For the department and other state employees, discipline will be per the State of Colorado Personnel Rules.

I understand that information contained in the department's information systems is highly confidential and is protected from improper use and disclosure by applicable laws. I agree not to disclose confidential information in violation of this agreement or applicable confidentiality laws.

☐ Agree to the Above Terms

Electronic Signature: Fea Mujer 10/14/2011 9:00:20 AM Print

Agree

Click the box saying you agree to the terms.

Also click the **Agree** box to

Please read the agreement (readable text located in Appendix I of the manual), click the **Agree to the Above Terms** box on the lower left corner, then click the **Agree** button on the lower right to continue. You must do both steps. You may now click on **"Signed Confidentiality Agreement"** to view and print for your records.

To close the confidentiality agreement, use the back ◀ in your tool bar. This is the ONLY place in the data system that you use the arrow.

Colorado Department of Health & Environment - Data Security, Use and Confidentiality Agreement

In consideration of my access to the Colorado Department of Public Health and Environment secure Web site and information, I agree to the following.

I understand that I am responsible for making every effort to prevent unauthorized users from gaining access to or using my user ID and password. I also agree to make every reasonable effort to prevent use of a computer for illegal or unethical purposes by all users, authorized or not.

I agree to immediately report any suspected or actual unauthorized access to the Colorado Department of Public Health and Environment point of contact that manages the information.

I will not share my password with any other person.

I will not leave my password around my computer or where another person might easily locate it.

I will change my password periodically and if I suspect it has been compromised. I will set up my passwords according to department guidelines for length and content.

I understand that this is a "shared fate" environment. My fellow users and clients may be affected or confidentiality compromised by the activities of other users. Preventing such activity is the shared responsibility of all users.

I agree to access only the information I need to do my job and not to access or attempt to access files that I am not authorized to use. I will not "browse" or otherwise use files or programs that exceed what is the minimum necessary to do my job. My use and disclosures of information will be consistent with those permitted by the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other applicable laws and rules.

I agree not to discuss confidential information or to provide copies of confidential reports, regardless of how or where acquired, to family members, friends, professional colleagues, other employees, other clients or any other person unless such person has been authorized to have access to that information. If unsure who is authorized to access the information, I will check with my supervisor or the department point of contact who manages the information.

I understand that my access is granted for the purposes of public health and environmental protection. I will not use or disclose any data for any purpose or end inconsistent with the purposes of the system(s) for which access is granted. If I am unsure if any use or disclosure is permitted, I will discuss the issue with my supervisor and/or contact appropriate department program staff for further clarification.

I will take precautions to protect confidential data displayed on my screen from viewing by others. This may mean re-positioning my computer screen, adding a device to limit other's view, turning off the computer when leaving the area or enabling password-protected screen savers. I will take reasonable and appropriate steps taking into account the staff and public access to my area and the nature of the data on the system.

I understand that files I access may be protected from distribution by copyright or other applicable laws. The department has exclusive copyrights in all original works of authorship created by its employees or contractors. This applies to both published and unpublished works, and includes, but is not limited to, written documents, charts, graphs, imagery and maps. Other entities' copyrighted works also may be accessible on this Web site. I will not reproduce, distribute or display these works without permission from the department or another copyright owner.

I understand that for audit or system security purposes, the department may monitor all my activity.

I understand that the department may revoke my access at any time, with or without cause.

I understand that any violation of federal, state, local or the program's confidentiality requirements or this Agreement will be considered a breach of my obligations and may result in disciplinary action, up to and including termination of employment, termination of contractual relationship and other remedies allowed by law during or after my employment or work with these data systems. For the department and other state employees, discipline will be per the State of Colorado Personnel Rules.

I understand that information contained in the department's information systems is highly confidential and is protected from improper use and disclosure by applicable federal and state laws. I agree not to disclose confidential information in violation of this agreement or applicable confidentiality laws.

Signed By: cjlw

Date Signed: 9/13/2011 3:58:00 PM

[Print Agreement](#)

Click here to print.

Integrated Data Systems Screens

When you first open the system, select the Children and Youth with Special Health Care Needs (CYSHCN). **You may select one of three options such as Broadcast messages, Program Information, and Documents. Broadcast messages contain new updates about the *CYSHCN Data System*. Program Information contains a description of Health Care Program for Children with Special Needs (HCP). Lastly, Documents contain PDF downloads of the *CYSHCN Database User Manual* and “*CYSHCN Data System Request Form*”.** HCP Team Leaders or Program Coordinators may request data reports or queries from the state data team by submitting a “CYSHCN Data System Request Form”. The “*CYSHCN Data System Request form*” is posted on <https://www.phi.dphe.state.co.us/NonAuthenticated/announcements.aspx?program=hcp>

For further information about CYSHCN data that may be available to you from the *CYSHCN Data System*, you may contact:

Ann Whitehouse, RN, BSN
Data Owner; *CYSHCN Data System*
Health Care Program for Children with Special Needs
Prevention Services Department
Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, CO 80246-1530
303-692-2327
Ann.Whitehouse@state.co.us

The screenshot shows a window titled "Broadcast Message" with a light gray background. At the top, there are three tabs: "Broadcast Message" (highlighted in orange), "Program Information", and "Document Download". Below the tabs, the text "Broadcast Message" is displayed in a large, bold, black font. Underneath the title, there is a large, empty yellow rectangular area, likely a placeholder for a message or image. To the right of this area is a vertical scrollbar with a blue track and a white slider. A light blue callout bubble with a black outline points from the right edge of the window towards the top right corner of the image.

Click on “Document Download” to obtain the Data System Request Form and the User Manual.

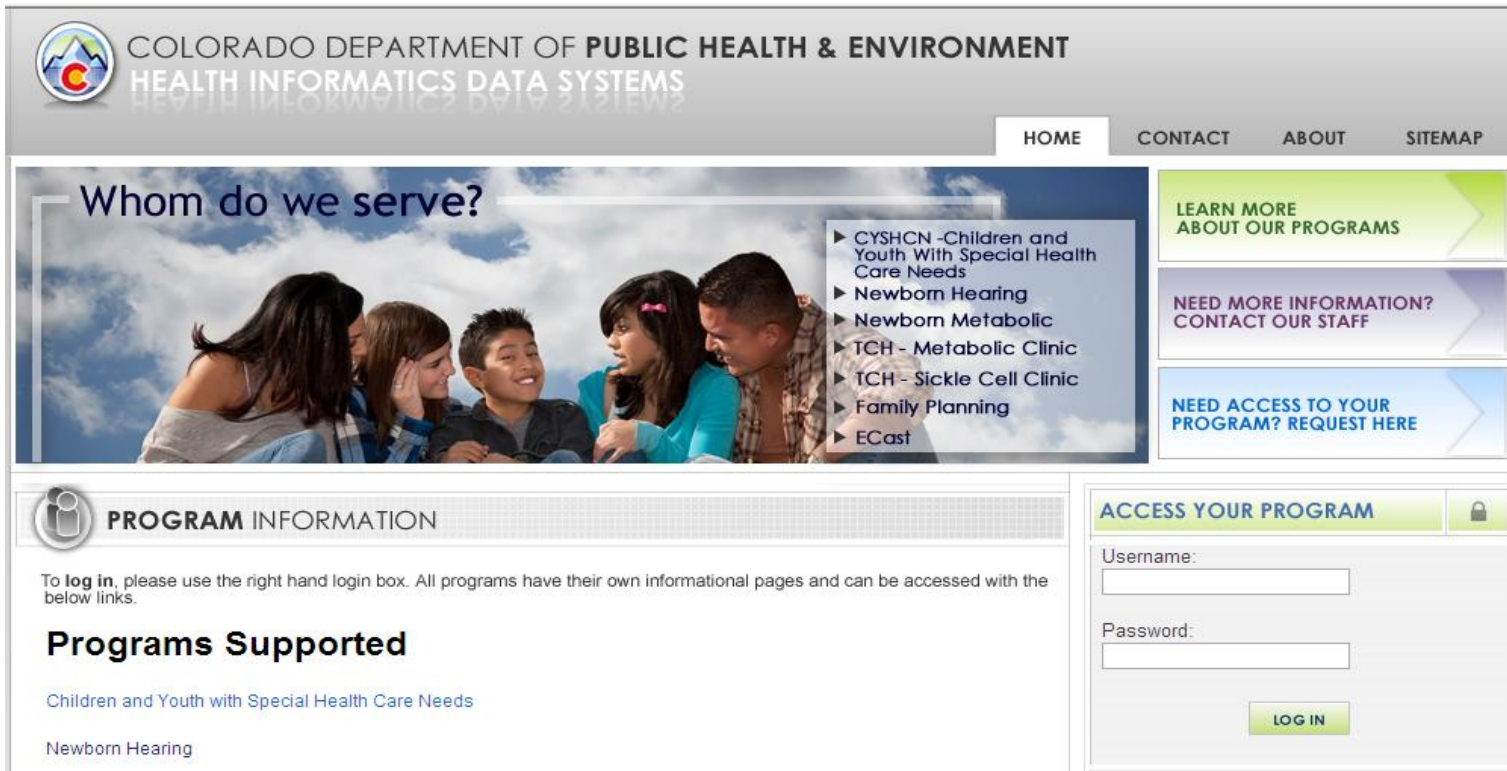
[illegible]

Home

The screenshot shows the 'Integrated Data System (IDS)' interface. At the top, there is a toolbar with buttons for 'FAVORITES', 'LAST 10', and 'CLOSE ALL TABS'. On the right of the toolbar is an 'ID#' field and a user profile for 'Jane Doe'. Below the toolbar is a navigation bar with 'HOME', 'SEARCH', and 'REPORTS' buttons. A callout labeled 'Menu Buttons' points to these buttons. On the left, a 'Jane Doe- Option Menu' is visible with a dropdown arrow, and a callout labeled 'Home' points to it. Below this menu are links for 'Search' and 'Reports'. The main content area features a large 'Personal Information' section with fields for Username, First Name, Last Name, Middle Name, Email, Last Changed, and Password. A callout labeled 'Toolbar' points to the top navigation bar. Another callout labeled 'Home' points to the 'Home' button in the navigation bar. Below the 'Personal Information' section is an 'Accordion Pane' containing four expandable sections: 'Change Your Password', 'Security', 'Toolbar Options', and 'Manage Favorites'. A callout labeled 'Accordion Pane' points to this section. The 'Personal Information' section also includes a 'Signed Confidentiality Agreement' link and an 'Update' button. The 'Site Access' section shows the user's role as 'CDPHE Health Care Program for Children w Denver (DHCP)'.

Each of the gray bars going across the screen in the Accordion Pane shown above opens up, one at a time, to allow you to change to other options.

Accessing the *CYSHCN Data System* for the First Time



The screenshot shows the homepage of the Colorado Department of Public Health & Environment's Health Informatics Data Systems. The header includes the department's name and a navigation menu with links for HOME, CONTACT, ABOUT, and SITEMAP. A large banner image of a group of children is titled "Whom do we serve?". To the right of the banner is a list of programs: CYSHCN - Children and Youth With Special Health Care Needs, Newborn Hearing, Newborn Metabolic, TCH - Metabolic Clinic, TCH - Sickle Cell Clinic, Family Planning, and ECast. Further right are three buttons: "LEARN MORE ABOUT OUR PROGRAMS", "NEED MORE INFORMATION? CONTACT OUR STAFF", and "NEED ACCESS TO YOUR PROGRAM? REQUEST HERE". Below the banner is a "PROGRAM INFORMATION" section with a note about logging in and a list of supported programs: "Children and Youth with Special Health Care Needs" and "Newborn Hearing". On the right side of the page is an "ACCESS YOUR PROGRAM" login box with fields for Username and Password, and a "LOG IN" button.

COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
HEALTH INFORMATICS DATA SYSTEMS

HOME CONTACT ABOUT SITEMAP


Whom do we serve?

- ▶ CYSHCN - Children and Youth With Special Health Care Needs
- ▶ Newborn Hearing
- ▶ Newborn Metabolic
- ▶ TCH - Metabolic Clinic
- ▶ TCH - Sickle Cell Clinic
- ▶ Family Planning
- ▶ ECast

LEARN MORE ABOUT OUR PROGRAMS

NEED MORE INFORMATION? CONTACT OUR STAFF


NEED ACCESS TO YOUR PROGRAM? REQUEST HERE

 PROGRAM INFORMATION

To **log in**, please use the right hand login box. All programs have their own informational pages and can be accessed with the below links.

Programs Supported

- [Children and Youth with Special Health Care Needs](#)
- [Newborn Hearing](#)

ACCESS YOUR PROGRAM 

Username:

Password:

LOG IN

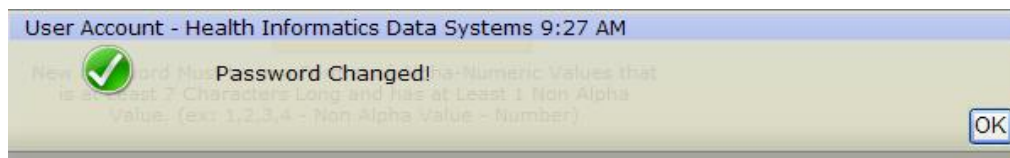
Type your *Username* in the **Access Your Program** box. You can copy and paste the temporary password sent to you in the email directly into the **Password** box.

The system will prompt you to change your password once it accepts your login information. Paste your temporary password again into the **Old Password** box, then type in a new password and confirm new password. Your password must conform to the standards for passwords that appear under the **Confirm New Password** entry box: “New password MUST be in a format of alpha-numeric values that is at least 7 characters long and has at least 1 non-alpha-numeric value.

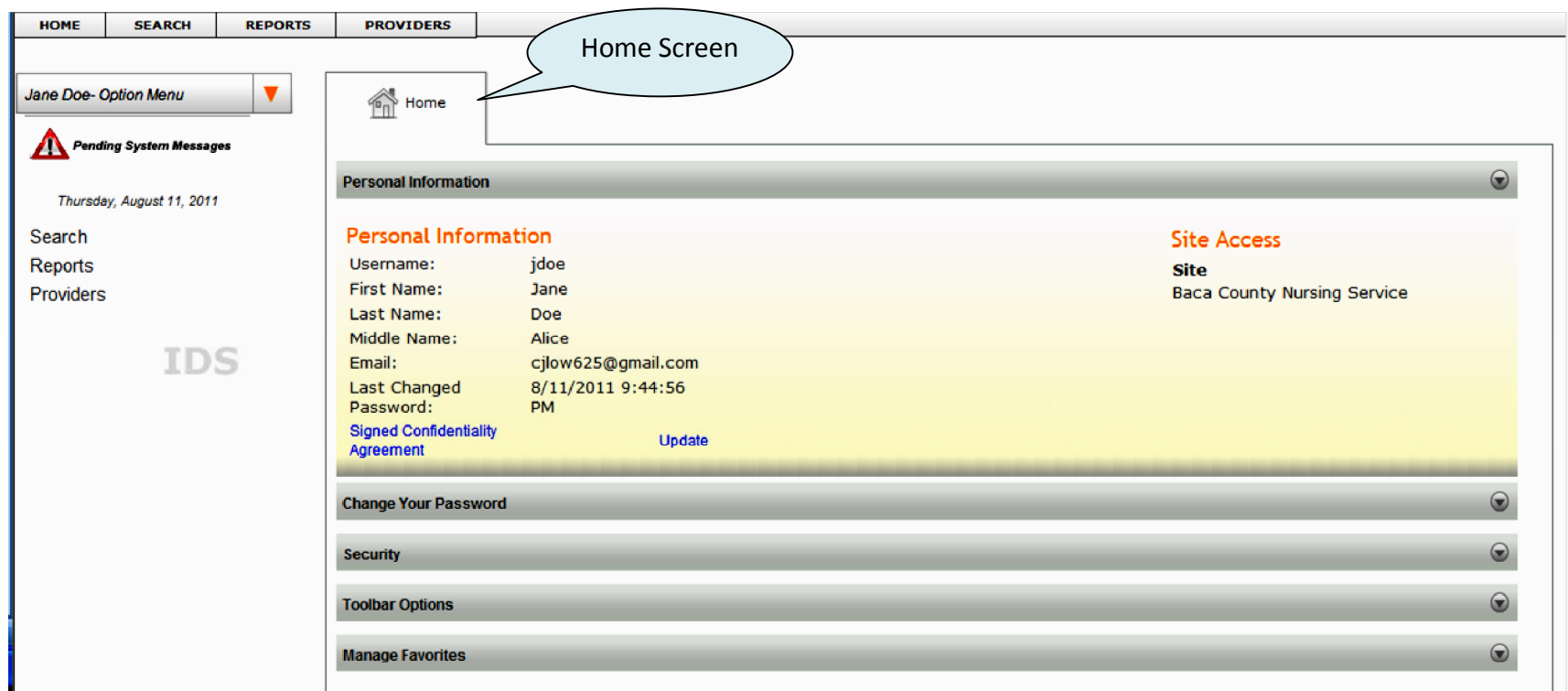
The screenshot displays the Integrated Data System (IDS) web application. At the top, there are navigation tabs: FAVORITES, LAST 10, and CLOSE ALL TABS. The main header shows the system name 'Integrated Data System (IDS)' and a user profile for 'Jane Doe' with an ID#. Below the header, a sidebar on the left contains a 'Jane Doe- Option Menu' and a 'Pending System Messages' section dated Thursday, August 11, 2011. The main content area features a 'Home' button and a 'Change Your Password' section. This section includes three input fields for 'Old Password', 'New Password', and 'Confirm New Password'. A message below these fields states: 'New Password Must be in a Format of Alpha-Numeric Values that is at Least 7 Characters Long and has at Least 1 Non Alpha Value. (ex: 1,2,3,4 - Non Alpha Value - Number)'. A 'Reset' button is located at the bottom of the password change section. The sidebar also lists 'Search', 'Reports', and 'Providers' as navigation options.

Once you complete these steps, a pop up box will indicate that your password has been changed successfully.

Click on OK to close the pop up box and return to the **Home** screen.



Click here to close pop up box.



Security

To update your security question, click on the gray **Security** line. Enter your password, select a new security question and type the answer. Click on **Update** to save.

HOME SEARCH REPORTS

Jane Doe- Option Menu ▼
Tuesday, October 11, 2011
Search
Reports

IDS

Home

Personal Information

Change Your Password

Security

Toolbar Options

Manage Favorites

Click here to update your security question.

Password:

Security Question: What was the name of your hometown newspaper? ▼

Security Answer:

Required Field Security Answer

Update

Login Assistance

HINT: If you are unable to login to the *CYSHCN Data System* after your Username and Password are established, click on the “Can’t access your account?” link.

You can reset your login information online

The screenshot displays the Colorado Department of Public Health & Environment's Health Informatics Data Systems website. The header includes the department's name and navigation links for Home, Contact, About, and Sitemap. A banner titled "Whom do we serve?" features a group of diverse children and a list of supported programs: CYSHCN - Children and Youth With Special Health Care Needs, Newborn Hearing, Newborn Metabolic, CHC - Metabolic Clinic, CHC - Sickle Cell Clinic, Family Planning, and ECast. To the right of the banner are three buttons: "LEARN MORE ABOUT OUR PROGRAMS", "NEED MORE INFORMATION? CONTACT OUR STAFF", and "NEED ACCESS TO YOUR PROGRAM? REQUEST HERE". Below the banner, the "PROGRAM INFORMATION" section provides instructions on logging in and lists the programs supported. On the right, the "ACCESS YOUR PROGRAM" section contains a login form with fields for Username and Password, a "LOG IN" button, and a link for "Can't access your account?". A speech bubble points to this link with the text "Click here if you cannot access your account."

COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
HEALTH INFORMATICS DATA SYSTEMS

HOME CONTACT ABOUT SITEMAP

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NEED ACCESS TO YOUR PROGRAM? REQUEST HERE

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Programs Supported

- Children and Youth with Special Health Care Needs
- Newborn Hearing
- Newborn Metabolic
- CHC Metabolic Clinic

ACCESS YOUR PROGRAM

Username:

Password:

LOG IN

Click here if you cannot access your account.

Can't access your account?
Request a New User Account

Choose one of the following reasons that prevent you from accessing the Health Informatics Data System. This example shows that you have forgotten your password.

The screenshot shows a web interface for account access issues. At the top, a header bar contains a user icon and the text 'TROUBLE ACCESSING YOUR ACCOUNT?'. Below this is a large heading 'What's preventing you from accessing the Health Informatics Data Systems?'. A list of five radio button options follows: 'I forgot my password' (selected), 'I forgot my username', 'My account may have been compromised', 'My password doesn't seem to be working', and 'Another error or problem'. A second heading 'Forgot your password?' is displayed, followed by a prompt: 'Please enter your Health Informatics Data System username to start the password recovery process.' Below this are two input fields: 'Username:' with the value 'milee' and 'Verification:' with a CAPTCHA image showing the code '7TFAH'. To the right of the CAPTCHA is a label 'Enter the code shown:' and a small input box containing '7TFAH'. A 'Submit' button is located at the bottom right of the form area. Three callout boxes provide guidance: one on the left says 'First, choose one of them.' pointing to the radio buttons; another on the left says 'Then, this will appear.' pointing to the 'Forgot your password?' section; and a third on the right says 'Click here to submit your request.' pointing to the 'Submit' button.

TROUBLE ACCESSING YOUR ACCOUNT?


What's preventing you from accessing the Health Informatics Data Systems?

- ☒ I forgot my password
- ☐ I forgot my username
- ☐ My account may have been compromised
- ☐ My password doesn't seem to be working
- ☐ Another error or problem

Forgot your password?

Please enter your Health Informatics Data System username to start the password recovery process.

Username:

Verification: 

Enter the code shown:

First, choose one of them.

Then, this will appear.

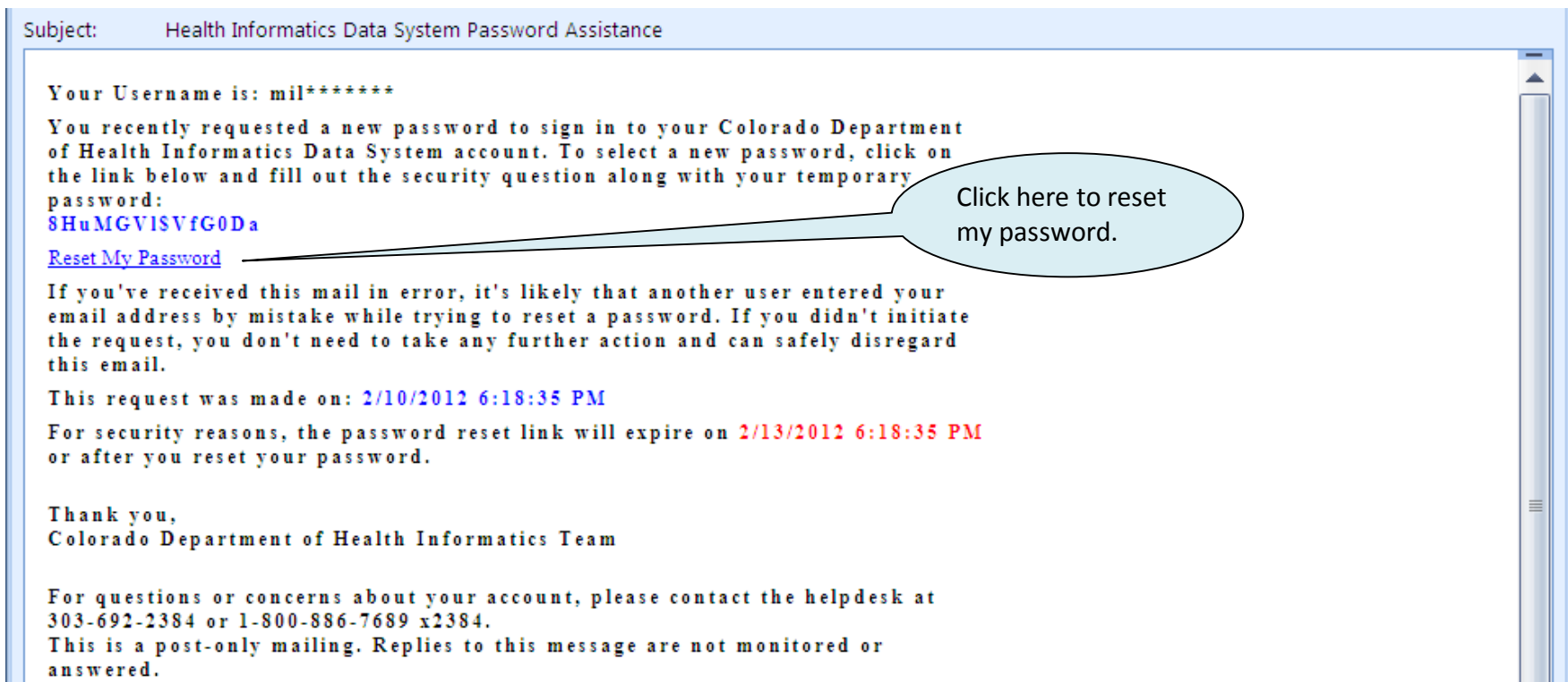
Click here to submit your request.

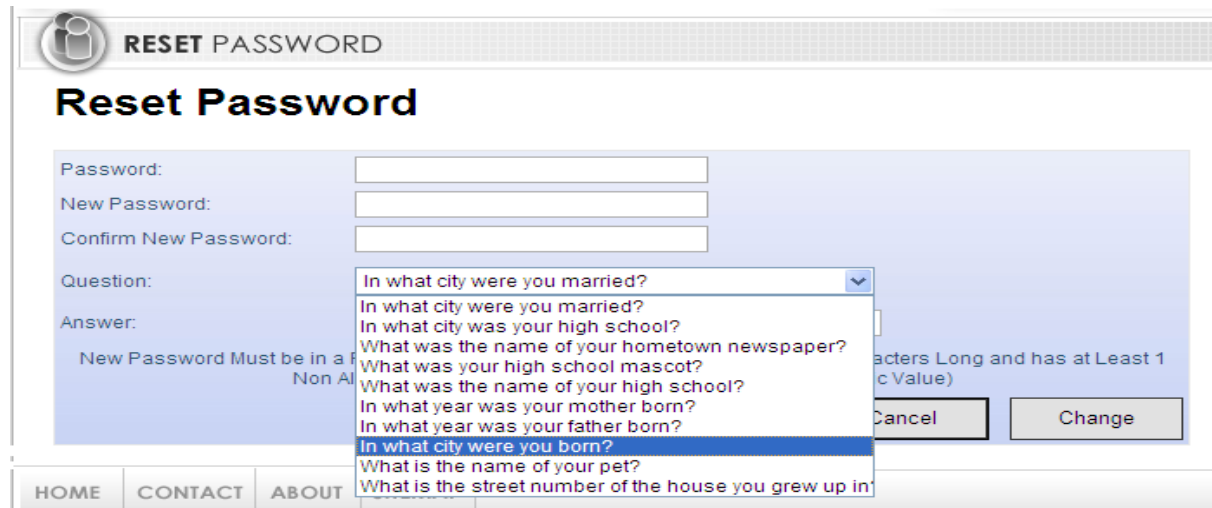
Reset Password

To initiate the password reset process, please follow the instructions sent to your *****@state.co.us email address. If you no longer have access to that account, please contact the helpdesk to update your information and reset your password.

Your request has been sent to your email.

This E-Mail message will be sent to your E-Mail address.





RESET PASSWORD

Reset Password

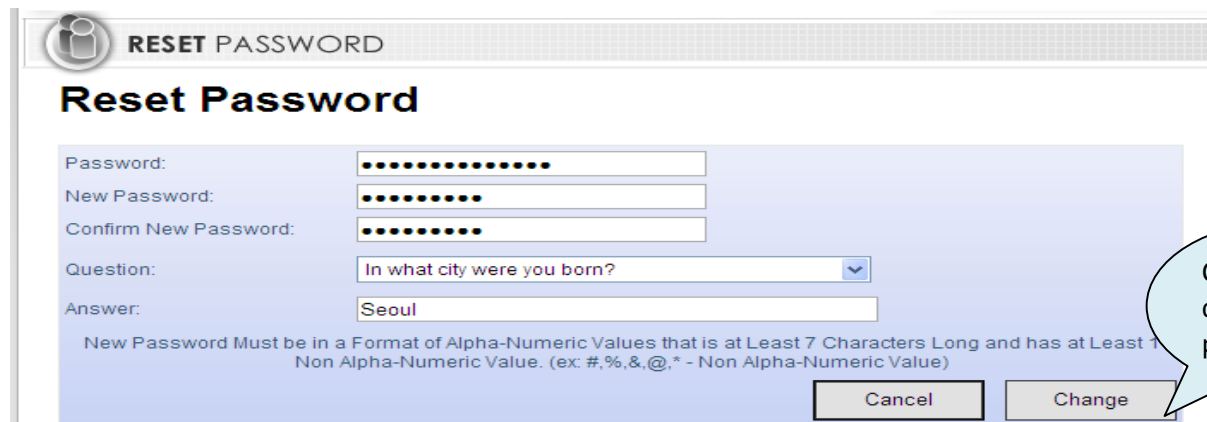
Password:
 New Password:
 Confirm New Password:
 Question:
 Answer:

New Password Must be in a Format of Alpha-Numeric Values that is at Least 7 Characters Long and has at Least 1 Non Alpha-Numeric Value. (ex: #, %, &, @, * - Non Alpha-Numeric Value)

Cancel Change

HOME CONTACT ABOUT

You will answer your security question that you set up when you requested your account.



RESET PASSWORD

Reset Password

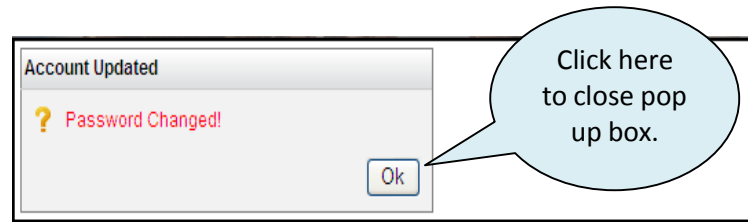
Password:
 New Password:
 Confirm New Password:
 Question:
 Answer:

New Password Must be in a Format of Alpha-Numeric Values that is at Least 7 Characters Long and has at Least 1 Non Alpha-Numeric Value. (ex: #, %, &, @, * - Non Alpha-Numeric Value)

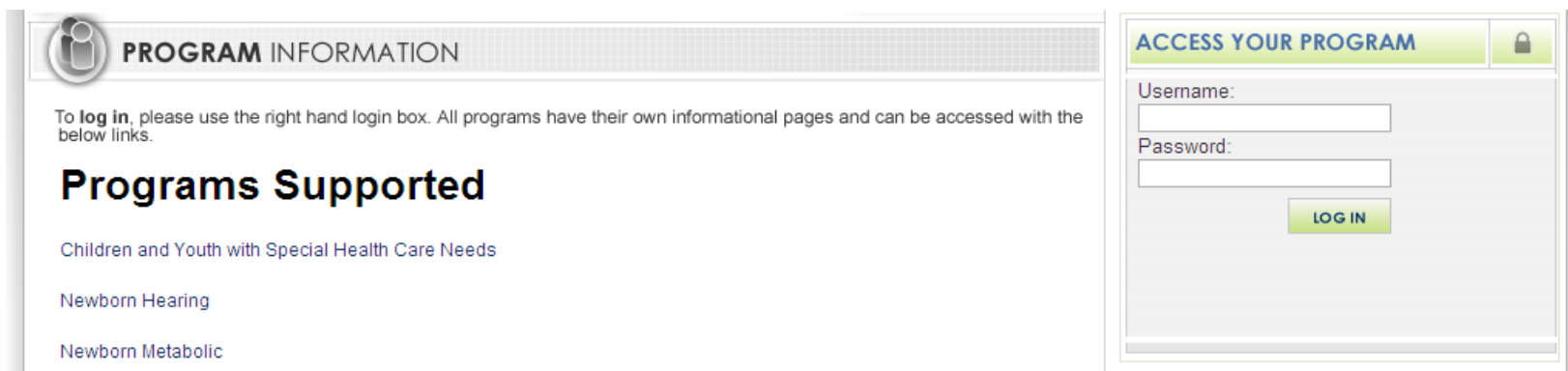
Cancel Change

Click here to change your password

You will copy the encrypted password shown in light blue from the email message and paste it on the columns. Click **Change** to submit your request.

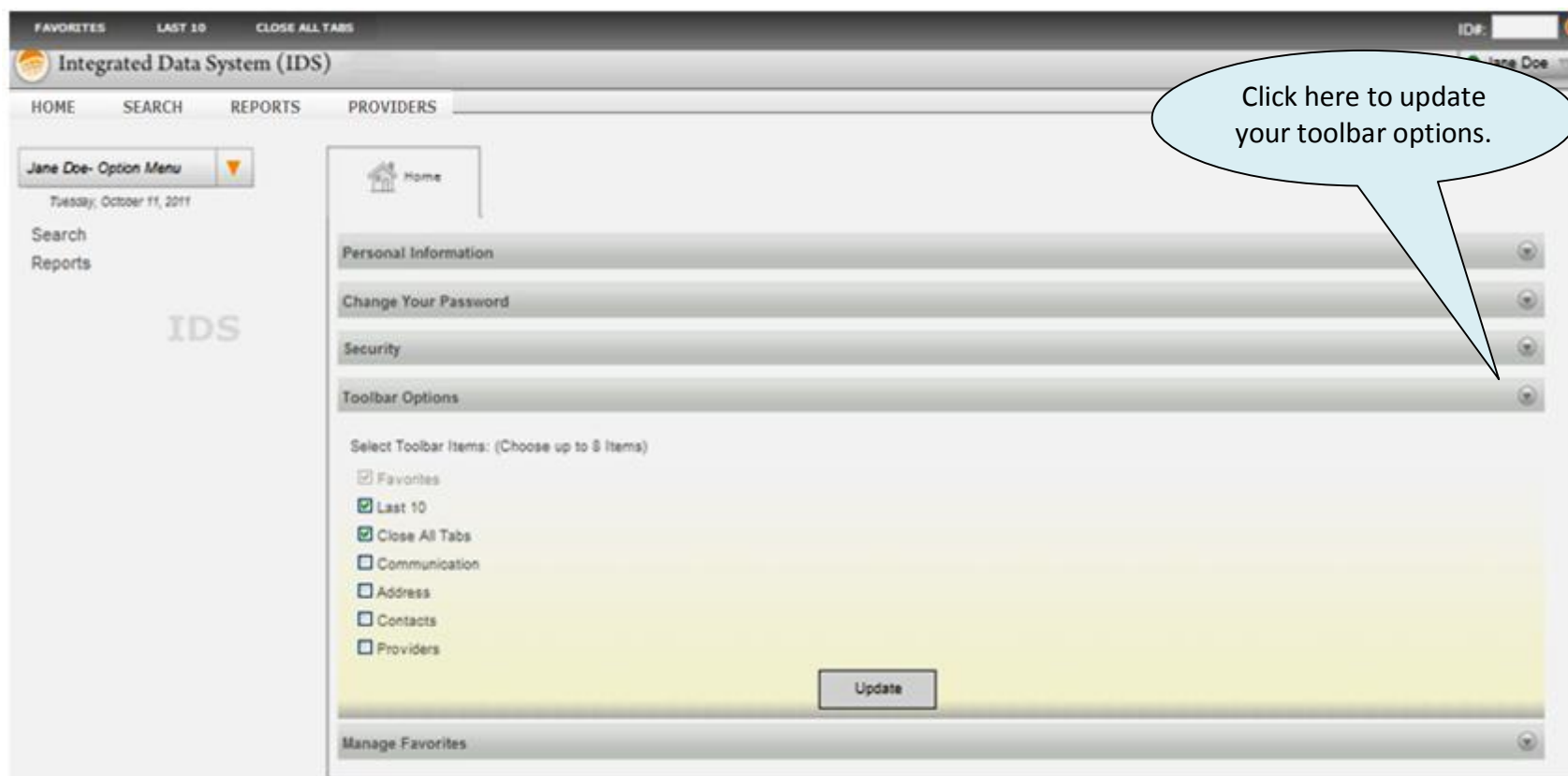


Click on **OK** to close the pop up box and return to Colorado Department of Public Health and Environment Health Informatics Data System Home Page to log in.



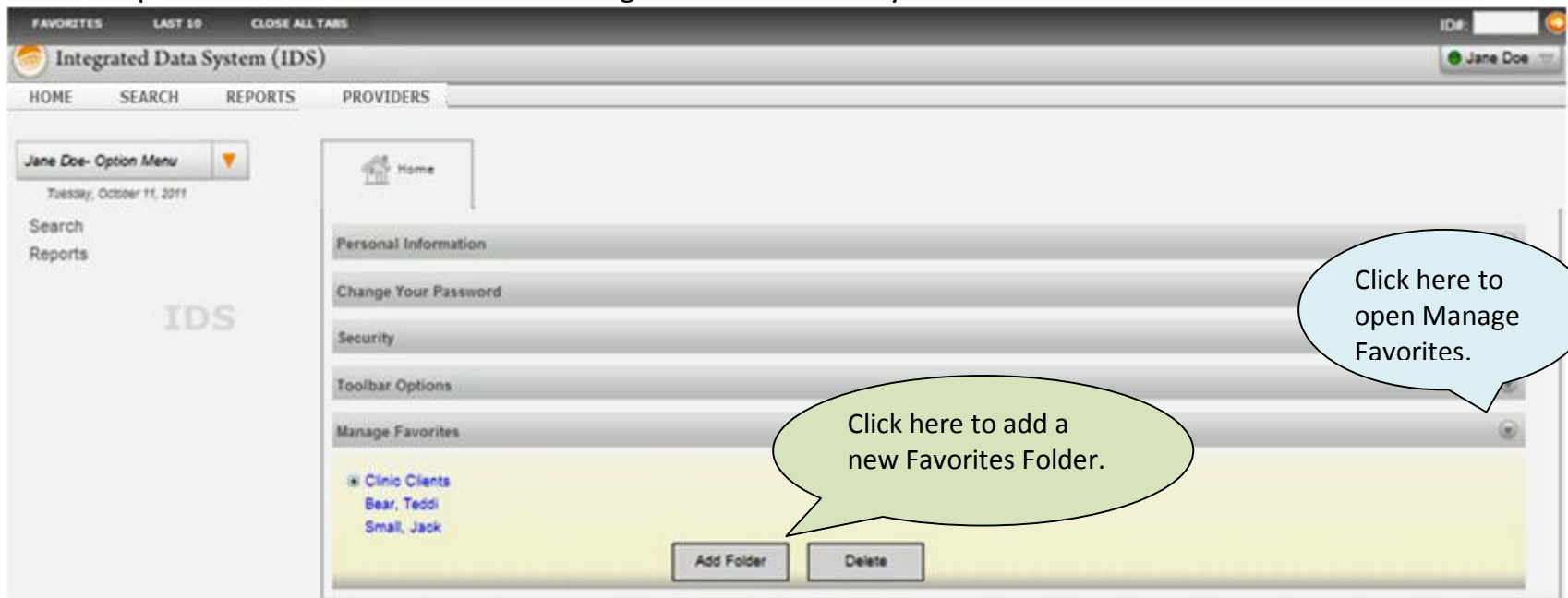
Toolbar Options

You can add several different options to your Toolbar. Click on the downward arrow on the Toolbar Options line. Then, click the item's box that you want to have visible in the Toolbar. Click on **Update** to save.

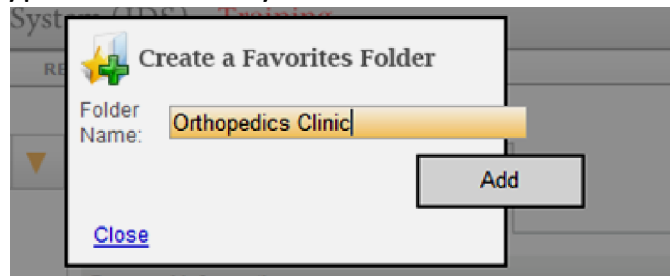


Manage Favorites

The last option on the Home screen is Manage Favorites. Here you will be able to add or delete favorites.



When the following box appears, type in the name you want for the folder and click on **Add**.

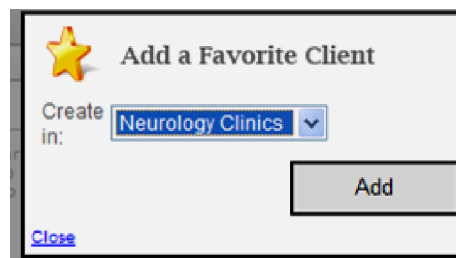


You can add as many folders as needed.

To add a client to the folder, go to the client's record and click on **Add to Favorites**.



Select the appropriate folder from the drop down list in the pop up box below, then press **Add**.



You may add the client to as many favorite folders as needed.

Search

Any time you plan to enter a new client or find an existing client, click on the Search menu button.



Once clients are entered into the **CYSHCN Data System**, you will be able to search for and find them using the Search menu button. Enter data into the screen for any of the fields that will help you locate the client (example: last name, first name, date of birth...).

Before searching for a client, make sure you mark the appropriate client search options in the top right of the window. Checking the “**All Site**” box will search all HCP sites for your criteria. Checking the “**All Status**” box will consider all client statuses and not just the Active clients.

The screenshot shows the 'Client Search' window. At the top right, there are two checkboxes: 'All Site' and 'All Status', both of which are checked. A callout bubble points to these checkboxes with the text 'Click search options here.' Below the search fields, there are three buttons: 'Search', 'Clear', and 'Add Client'. A callout bubble points to the 'Search' button with the text 'Click here to open the record.' At the bottom left, there are two links: 'Load' and 'Close'. A callout bubble points to the 'Close' link with the text 'Click here to close the Client Search window.'

Client Search

Client ID#:

Birth Date: Order:

Last Name:

ID Types:

Phone Number: () -

First Name:

ID:

☒ All Site ☒ All Status

Search Results

	ID	Last Name	First Name	Program	DOB	Relationship	Created By	Status
Load	80	Bear	Teddi	HCP CDPHE Health Care Program for Children with Special Needs	01/01/2008		jdoe	ACTIVE

[Close](#)

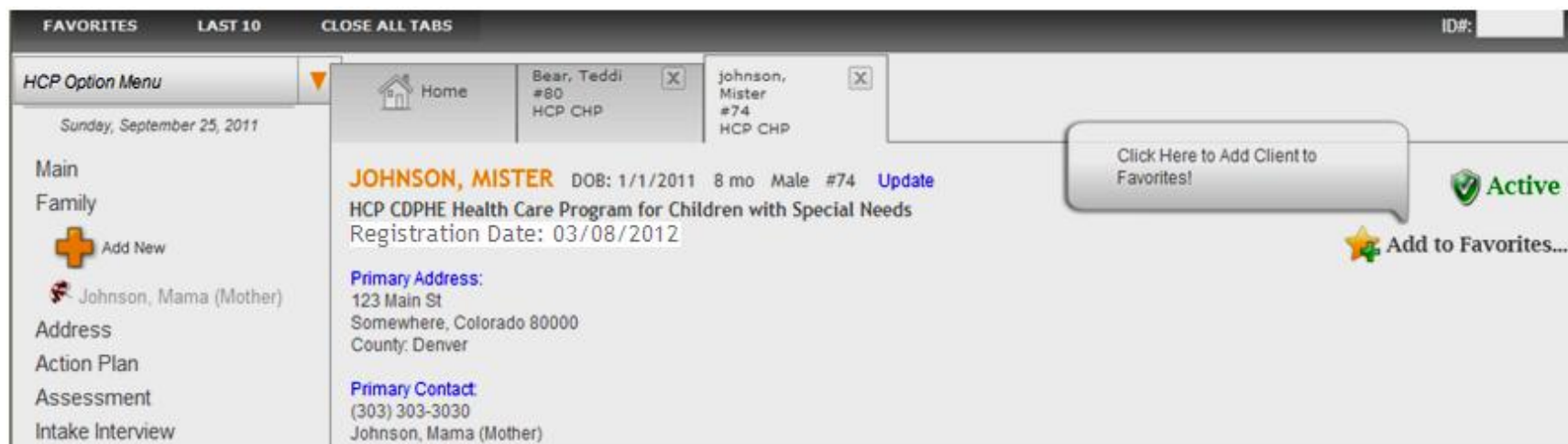
In the example shown above, we searched for a client with the last name of “Bear.”

We recommend that you mark both boxes when searching for a new client you expect to register. Sometimes clients move around the state and have been registered in another location.

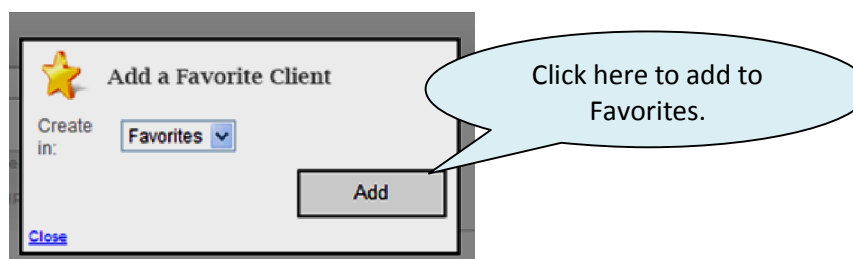
Click on **Load** to open the client’s record or **Close**.

Adding Favorites

If this client is one you will be accessing frequently, you may want to add him/her as a favorite.

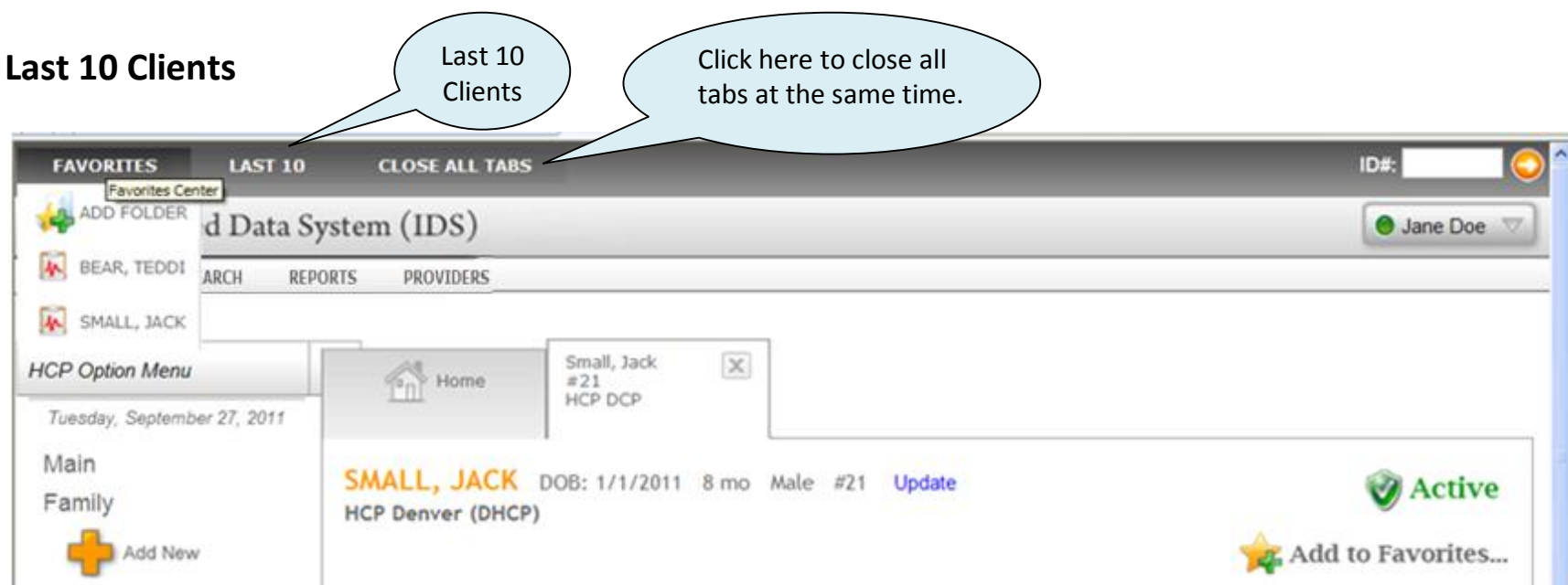


Click on Add to Favorites. When this pop up appears, click **Add**.



Now you can go to your **Favorites** tab and click on the client to open his record.

Last 10 Clients



The data system automatically stores the last 10 client records that you have opened. To see those, click on Last 10. When you open a new client when there are already 10 clients in the Last 10 list, the system will add the new client and delete the oldest one from the list.

Close All Tabs

The **Close All Tabs** option provides you with a way to close all client tabs simultaneously.

HCP Option Menu or “Tree”

We call the list of screens in the data system the **HCP Option Menu** or “Tree.” You may click on any of the items in the “Tree” to add or modify information.

The **HCP Option Menu** or “Tree.”

HCP Option Menu ▼

Pending System Messages

Tuesday, April 17, 2012

[Main](#)
[Family](#)
 Add New
 May, Mama (Mother)
[Address](#)
[Action Plan](#)
[Assessment](#)
[Intake Interview](#)
[Communication](#)
[Contact Information](#)
[Condition](#)
[IDs](#)
[Insurance](#)
[Notification](#)
[Race](#)
[SDoH](#)
[Letters](#)
[Transfer](#)
[Providers](#)

Home

May, Day
 #54
 HCP CHP

MAY, DAY DOB: 5/1/2005 6 yo Female #54 [Update](#)
 HCP CDPHE Health Care Program for Children with Special Needs
 Registration Date: 04/16/2012

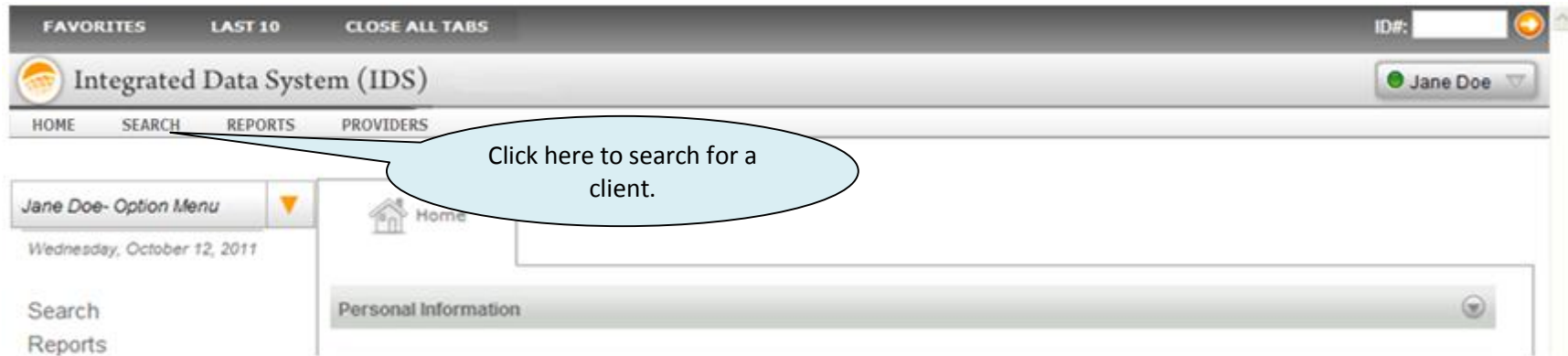
[Primary Address:](#)
 PO BOX 555
 Dancing Gate, Colorado 55555
 County: Alamosa

[Primary Contact:](#)
 (303) 555-5555
 May, Mama (Mother)

Active
 Add to Favorites...

Registering a Client

When you want to register a new client, first click on the **Search** tab to search the database for the child.




Begin by typing a client's name and personal information into the fields on this screen to search.

If you want the client to be placed in the first tab position on the screen, also click the **Load in First Tab** spot. Then type some criteria into at least one box to make sure that the client is not already registered in the *CYSHCN Data System*. In the example below, we searched for a client with last name “Test.” Three clients with that name appeared at the bottom of the screen.

Client Search

Client ID#:

Birth Date:  Order:

Last Name:

ID Types:

Phone Number: ()

First Name:

ID:

☒ Load in First Tab ☒ All Site ☒ All Status

Relationship Search

Type:

Last Name:

First Name:

Search Results

	ID	Last Name	First Name	Program	DOB	Relationship	Created By	Status
Load	115	test		HCP CDPHE Health Care Program for Children with Special Needs	01/01/2001		gpturtle	ACTIVE
Load	123	test		HCP CDPHE Health Care Program for Children with Special Needs	09/28/2011		gpturtle	ACTIVE
Transfer	228	test		HCP Dolores County Public Health	09/29/2011		gpturtle	ACTIVE

When searching, make sure to check the All Site and All Status boxes shown here to avoid creating a duplicate client.

If you need to add a new client, click here.

Load client

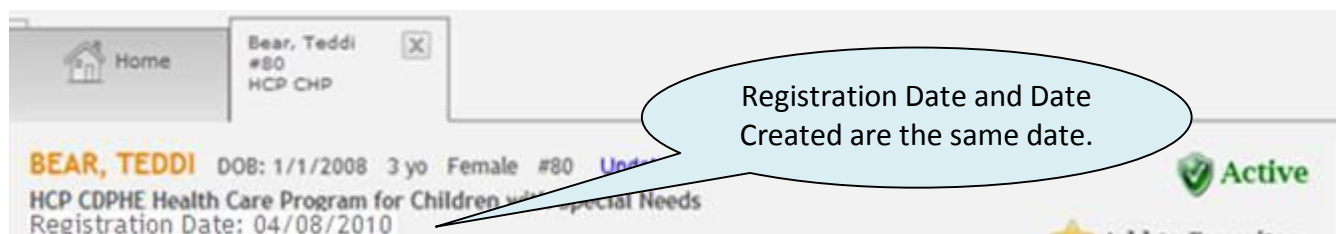
If your new client is **not** one of those on the list under Search Results, select **Add Client** to create a new child's file. If your client **does appear** as a client in your site, click on **Load** to the left of her/his client ID.

HINT: If your client **does appear** but in another HCP site, you will need to request that the existing site transfer the client to your site in the data system.

New Client Registration

To register a new client, use the tab key and your mouse to navigate through the four steps demonstrated on the next few pages. We call the process of entering a new client a “Wizard”. No data is saved into the data system until you have gone through the “Wizard” and clicked on **Finish** after Step 4.

HINT: Once record saved, Registration Date will add to the client under Name, Date of Birth, and Regional Office. This also appears as the Date Created in the detail section when you click the Update link button.



Step 1: Client Information

When you want to add a new client after searching, you will see that the criteria you typed into the search screen are already recorded in the client information screen.

HINT: You can edit the pre-populated data here or click **close** in the bottom left corner to close the screen without saving any information.

To proceed with registration, fill out all of the other fields for which you have the information. The more data you input, the easier it is to ensure a unique client record.

The screenshot shows the 'NEW CLIENT REGISTRATION' form. On the left, a sidebar lists the steps: Step 1: Client (highlighted), Step 2: Family Members, Step 3: Address, Step 4: Contact, Summary, and Finish. A callout points to the 'Close' link at the bottom of this sidebar, stating 'Click here to close client.' The main form area is titled 'Step 1: Client Information' and contains fields for Last Name (Johnson), First Name, AKA Last Name, AKA First Name, Birth Date, Ethnicity Hispanic (with a dropdown menu showing Yes, No, Unknown, and Refused), Suffix, and Site (TriCounty Health Dept). At the bottom right, there are three buttons: 'Next', 'To Summary', and 'Cancel'. A callout points to the 'Next' button, stating 'Click Next to continue adding data.' Another callout points to the 'To Summary' button, stating 'Click “To Summary” to exit wizard. Make sure to click on Finish on Summary screen to the save data.'

To continue adding data about the client using the “Wizard”, select **Next** to move to the ***Family Members*** screen. If you plan to add the rest of the data later, you can exit the wizard. However, to save the client information, you must select **To Summary** and select ***Finish*** on the Summary screen. Failure to select Finish will delete all the data you entered after moving from the Search screen. (Please see page 43 for further instructions.)

Step 2: Family Members

Enter the client's family members in this screen. Fill in as many fields as you can and click on Add Family Member to save. Continue to add as many family members as you wish by clicking Add Family Member to save each entry. When you have entered everyone, click on **Next** to proceed to the next screen.

NEW CLIENT REGISTRATION

Step 1: Client
Step 2: Family Members
 Step 3: Address
 Step 4: Contact
 Summary
 Finish

Step 2: Family Member Information

Last Name: Johnson
 First Name: Mama
 Middle Name:
 Suffix:
 Gender: Female
 Relationship to Client:
 Language Spoken:
 Legal Guardian: ☒
 Interpreter Needed: ☒ Yes ☐ No

Relationship to Client Options:
 Mother
 Father
 Grandparent
 Sibling
 Other Relative
 Step-Parent
 Foster-Parent
 Friend/Neighbor
 Other
 Don't Know/Not Sure
 Refused

Language Spoken Options:
 English
 American Sign Language
 Arabic
 Cambodian
 Chinese (Mandarin)
 French
 Hindi
 Hmong
 Indonesian
 Japanese
 Korean
 Laotian
 Polish
 Romanian
 Russian
 Somali
 Spanish
 Portugese
 Vietnamese
 OTHER
 Don't Know/ Not Sure
 Refused

Close

Select a response from the drop down lists identifying the client family member is for Gender, Relationship to Client, and Language Spoken. Check off next to legal guardian and interpreter needed accordingly. It is optional to fill a middle name and (or) suffix.

Note: If you accidentally click **Next**, instead of Add Family Member, the system will ask you to validate the entry as shown in the next screen print. Select **Yes** to save. Click **No** if you do **not** want to add another family member.

Validate Entry

? You have entered a family member without adding it to the member listing to be inserted. Do you want to Add it and Continue?

If you click "Yes", the system will save the family member. If you click "No", you will return to the family member screen.

Yes No

The data system will return you to the **Family Member Information** screen showing the family member(s) you have entered. If you have made a mistake while entering the data, select **Delete** to return to the information screen and enter the correct information.

NEW CLIENT REGISTRATION

Step 2: Family Member Information

Step 1: Client
Step 2: Family Members
Step 3: Address
Step 4: Contact
Summary
Finish

Last Name: First Name: Middle Name: Suffix: Gender:

Legal Gender: to Client: Language Spoken: Interpreter Name:

[Add Family Member](#)

Click Delete to enter correct address information

	Last Name	Middle Name	First Name	Suffix	Gender	DOB	Relationship	Language	Guardian
Delete	Johnson		Mama		Female	09/22/2011	Mother	English	YES

Click Next to move on to the next screen.

Prev Next Cancel

When you have finished adding family members, click on **Next** to move on to **Step 3, Address**.

Step 3: Address

Enter address information and click **Add Address** to save. You can keep adding addresses, such as a PO Box, by repeating these steps. When you are ready to move to the next screen, click on **Next** to move to the next step of registration, **Contact Information**.

Note: Clicking on **Close** or **Cancel** will delete all the data you entered in the **Address** screen. Checking the primary address box will be the client's mailing address for correspondence.

Step 4: Contact Information

To add contact information for the client's family, select the family member/caregiver whose information you are documenting from the drop down list. You can only enter contact information for people whom you have entered as family members. Also select the **Contact Type** from the drop down list and enter the contact information (i.e. cell phone number, email address, etc). If the contact person has a preference for preferred method of contact , check the **Preferred Method of Contact** box.

NEW CLIENT REGISTRATION

Step 1: Client
Step 2: Family Members
Step 3: Address
Step 4: Contact
Summary
Finish

Close

Step 4: Contact Information

Contact Relationship: Bonnie Butler(Client) ▼

Contact Type: ▼

Preferred Method of Contact:

Contact:

[Add Contact](#)

Prev Next Cancel

Select Contact Relationship and Contact Type here.

Click here to save.

Click **Add Contact** to save. You can keep adding contacts, such as a telephone number by repeating these steps. Press **Next** when you are ready to move on to the next step.

Summary

Before adding this client, review all the information you have entered on the Summary screen. If you need to make edits, click on **Prev** (previous) button to return to the data entry screen which contains the data you must correct. When you have made all your edits, click through the screens by clicking on **Next** until you return to the Summary.

NEW PATIENT REGISTRATION

Summary

The following Patient is about to be added:

Last Name:	Middle Name:	First Name:	Suffix:	Gender:
Francken	Dobbins	Raul		Male
DOB:	Origin:	Ethnicity Hispanic:	Site:	
05/17/2011		NO		

Family Members

Last Name	Middle Name	First Name	Suffix	Gender	DOB	Relationship	Language	Guardian
Francken	Charlie	Alvin	Jr.	Male	08/11/2011	Father	English	YES

Address

Street	City	State	Zip	County	Primary
1234 Main St	Dry	Colorado	80000	Baca	YES

Contacts

Relationship	Contact Type	Contact	Preferred Method
Alvin Francken (Father)	Email	acf@mail.com	YES

Click 'Finish' to add Patient into the database.

Close.

Important: Click Finish to Save

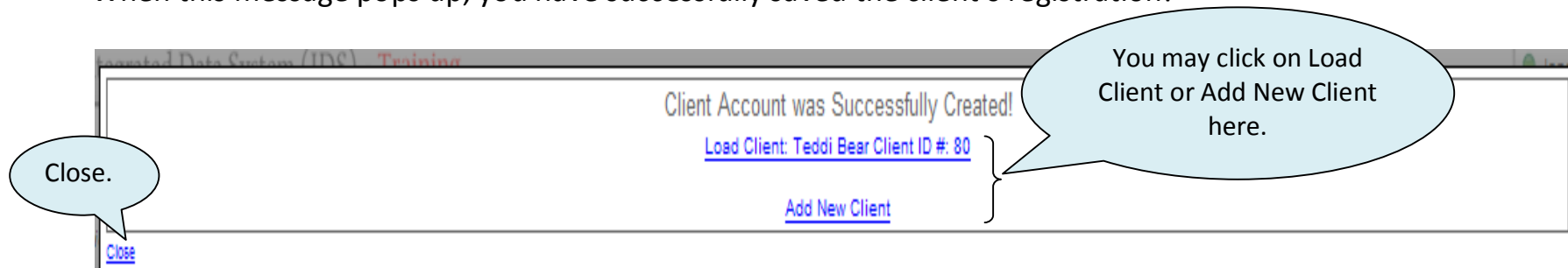
Prev **Finish**

[Close](#)

HINT: To save the data, you must click **Next** to return to the Summary page and then click **Finish**.

Hitting **Close** or **Cancel** will delete all the data you entered for this client's registration before completing these steps.

When this message pops up, you have successfully saved the client's registration!



To continue working on this client, click on **Load Client**.

Entering a Care Coordinator (Two-Step Process)

You can assign an HCP Care Coordinator to each client by using the “Provider” section located in the “Tree”. If multiple care coordinator names have been entered, a history will be saved and available to the data system users. Once the care coordinator’s name is entered into the *CYSHCN Data System*, you will be able to search for and find them using the Provider menu button.

Step One: Ensure a Care Coordinator is in the Provider Section of the CYSHCN Data System

- (1) Click **Providers** from Toolbar along the top
- (2) Click **Search for Providers**



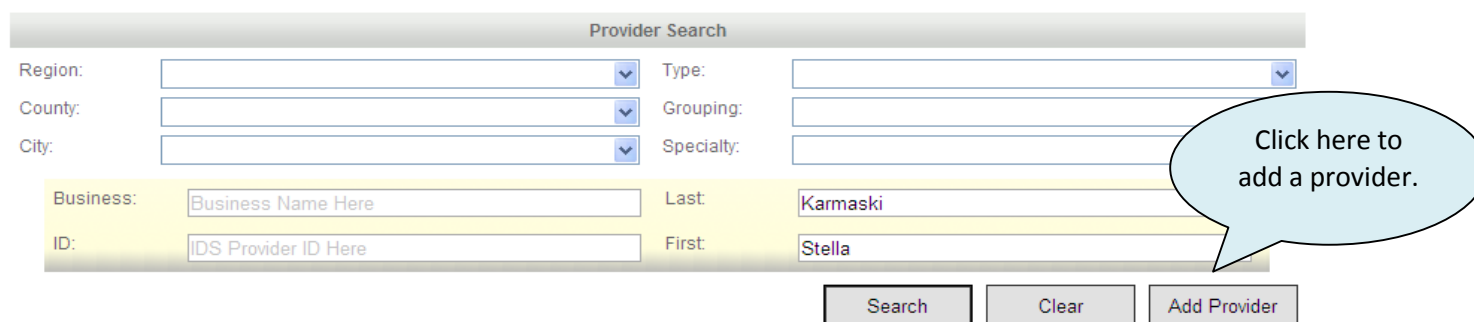
Providers

Health Care Program for Children with Special Needs

Click here to search for a provider.

[Search for Providers](#)

- (3) Enter minimal search criteria (first and last name), and then click **Search**
- (4) If you cannot locate the Care Coordinator’s name, then click **Add Provider**



Provider Search

Region: Type:

County: Grouping:

City: Specialty:

Business: Last:

ID: First:

Click here to add a provider.

(5) Then click **Begin** to start the Provider Wizard

Steps

- Start
- Detail
- Association
- Address
- Contact
- Specialty
- Summary
- Complete

Add New Provider

Please complete the following steps to add a new provider.

Click 'Begin' to start.

Click here to begin adding data.

Begin

(6) Click on the **Individual** radio button and enter HCP Care Coordinator's **Last Name** and **First Name**. Ignore the Business and Middle Name fields. Then click **Next**

Summary

Complete

Detail

Descriptor: ☐ Organization ☒ Individual

Business:

Last Name: Karminski

First Name: Stella

Middle Name:

[IDs...](#)

Last Name is a required field.

Click Next to move on to the next screen.

Prev Next Cancel

(7) Click the **Individual Provider** box. **Ignore the Associate With** field. Then click **Next**

Steps

- Start
- Detail
- Association
- Address
- Contact
- Specialty
- Summary
- Complete

Add New Provider

Choose an association or mark as Individual:

Associate With:

☒ Individual Provider

Prev Next Cancel

(8) Click **Skip Address for now**, and then click **Next**

☒ Skip Address for now.

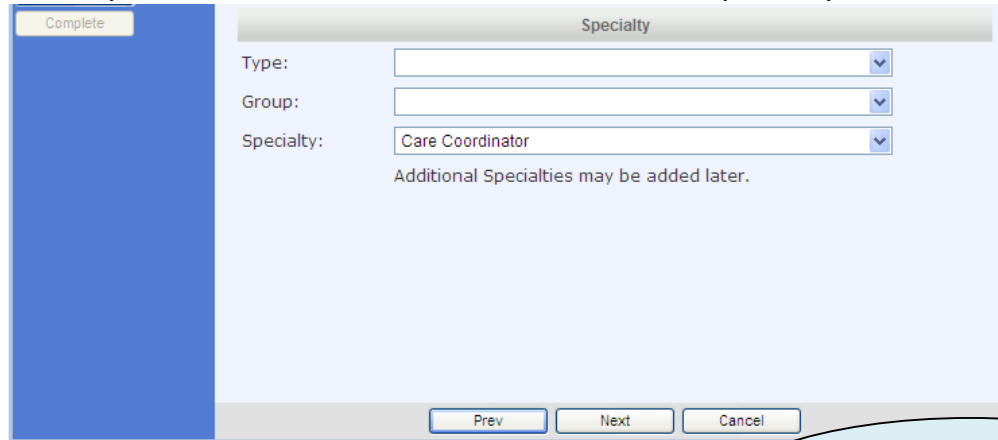
Prev Next Cancel

(9) Click **Skip Contact for now**, and then **Next**

☒ Skip Contact for now.

Prev Next Cancel

(10) **Ignore** the Type and Group fields. Select **Care Coordinator** in the Specialty field, and then click **Next**



(11) Click **Finish**

(12) Click **Exit**



When “COMPLETE” message appears, you have successfully saved the HCP Care Coordinator’s name on the client’s record.

Step Two: Associate an HCP Care Coordinator with a client's record

(1) Load a client's record into one of the five tabs

(2) Click **Providers** in the Tree at the left.

The screenshot shows the CYSHCN Data System interface. At the top, there are tabs for HOME, SEARCH, REPORTS, and PROVIDERS. Below the tabs, there is a date display: Wednesday, February 29, 2012. On the left, there is a sidebar with a tree view containing links: Main, Family, Add New (with a plus icon), Fox, Nadine A. (Mother), Address, Action Plan, Assessment, Intake Interview, Communication, Contact Information, Condition, IDs, Insurance, Notification, Race, SDoH, Letters, Transfer, and Providers. The Providers link is highlighted. A callout bubble points to the Providers link with the text: "Click here to associate a Care Coordinator with a client's record." The main content area displays information for a provider: FOX, SOPHIE A. DOB: 9/24/2001 10 yo Female #14 Update. Below this, it says HCP Garfield County Public Health. There are links for Primary Address (200 Jah Place, Durango, Colorado 80214, County: La Plata) and Primary Contact ((970) 515-1712, Fox, Nadine (Mother)). On the right, there is a status indicator "Active" with a green checkmark and a button "Add to Favorites..." with a star icon.

(3) Click **Add New**

(4) Enter the **Date of Association**

(5) Click the **Find a Provider**  image button.

(6) Search for the Care Coordinator's name and **Select** from the grid of results

(7) With Care Coordinator's name selected as Specialty, click **Add**

Home Fox, Sophie A. #14 HCP GAR

Providers

Date of Association: 02/29/2012

Provider: SAKE, PETE

Specialty: Care Coordinator

Close Add

Edit an existing Care Coordinator Association

- (1) Load a client's record into one of the five tabs
- (2) Click **Providers** in the tree on the left
- (3) Click **View**
- (4) Enter a different **Date of Association**, then click **Update**

Delete an existing HCP Care Coordinator

- (1) Load a client's record into one of the five tabs
- (2) Click **Providers** in the tree on the left
- (3) Click **View**
- (4) Click **Delete**, then confirm deletion

Home Fox, Sophie A. #14 HCP GAR

Providers

Date of Association: 02/29/2012

Provider: SAKE, PETE

Specialty: Care Coordinator

Record Information

Updated: 2/29/2012 2:21:00 PM
 Updated By: klanccast
 Created: 2/29/2012 2:21:00 PM

Close Update Delete

Click here to Delete.

HCP Intake Interview

You will need to enter **all** the information from the Intake Interview into the data system. To begin, select **Intake Interview** from the HCP Option Menu or Tree. Begin to enter the data from the Intake Interview.

You may exit the Intake Interview at any time by either clicking on **Cancel** or by clicking on one of the boxes on the upper left of the screen. **Either step will save the data you have entered.** You may save your data at any time by clicking **Save**.

IMPORTANT: DO NOT FORGET TO enter the **Date Intake Completed** *after* you have entered all the data from the Intake Interview!

HINT: When you ENTER the Date Intake Completed, the system will lock the form. You will no longer be able to edit your input.

First start by entering interview date and choose a contact method from the drop down list (the location or method of your contact with client). Next, enter your name in the “Completed By” field and select from the drop down lists for both “How did family hear about HCP?” and “Family Member”.

Input all listed criteria except Date Intake Completed.

The screenshot shows the 'Intake Interview' form in the CYSHCN Data System. The left sidebar contains a menu with options: Main, Family, Address, Action Plan, Assessment, Intake Interview, Communication, Contact Information, Condition, IDs, Insurance, Notification, Race, SDoH, Letters, Transfer, and Providers. The 'Intake Interview' option is highlighted. The main form area is titled 'Intake Interview' and contains the following fields:

- Interview Date: 09/26/2011
- Contact Method: Local Public Health Agency
- Completed By: Davis, Julie, Nurse
- How did family hear about HCP?: Children's Hospital
- Family Member: Dudley, Viola (Mother)
- Date Intake Completed: Required to Complete (Locks Interview)

Below these fields is a section titled 'Questions' with three numbered questions:

- 1) Does Ferdinand need Care Coordination services?
- 2) Is anybody else providing Care Coordination services for Ferdinand at this time?
- 3) Is the current amount of Care Coordination Ferdinand is receiving sufficient to meet most or all of your family's needs?

Below the questions is a section titled 'Client Requesting Information Only:' with the question: 'Do you want to proceed to Intake Interview Questions 4-17?'. There are two radio buttons for 'Yes' and 'No'.

At the bottom right of the form are 'Cancel' and 'Save' buttons.

Callouts provide additional instructions:

- Click on **Intake Interview**.
- Enter the **Date Intake Completed** as the last step of the Intake Interview.
- 1 through 3 are always entered for every client.
- Select **Cancel** or **Save** at any time to save your data.

Select how the family heard about HCP from the drop down list.

Home | TestLN, TestFN #1 HCP FCN | snow, white #22 HCP BLO | Dudley, Ferdinan #56 HCP CHP

Intake Interview

Interview Date: 09/26/2011

Contact Method: Local Public Health Agency

Completed By: Davis, Julie, Nurse

How did family hear about HCP? **Children's Hospital Colorado**

Family Member:

Date Intake Completed: Required to Complete (Locks Interview)

Questions

- 1) Does Ferdinan need Care Coordination services?
- 2) Is anybody else providing Care Coordination services for Ferdinan at this time?
- 3) Is the current amount of Care Coordination Ferdinan is receiving sufficient to meet most or all of your family's needs?

Client Requesting Information Only:

Do you want to proceed to Intake Interview Questions 4-17?

Select the family member asking for the information from the list of family members.

Interview Date: 09/26/2011

Contact Method: Local Public Health Agency

Completed By: Davis, Julie, Nurse

How did family hear about HCP? Children's Hospital Colorado

Family Member:

Date Intake Completed: Required to Complete (Locks Interview)

Dudley, Viola (Mother)
Dudley, Rhed (Father)

Proceed to enter **Interview Questions** 1 through 3. **Interview Questions 1 through 3 are always entered for every client**

If you mark “Yes” to Question 2, you will be asked to select “Who else is providing Care Coordination?” from a drop-down menu. If you mark “No” to Question 2, Question number 3 will **not** appear.

Interview Questions

1) Does Goldi need Care Coordination services? Don't Know/ Not Sure 1

2) Is anybody else providing Care Coordination services for Goldi at this time? Yes 2

Who else is providing Care Coordination?

- Early Intervention / BOCES
- Family Voices Colorado
- Friend
- Hospital
- Medical Provider
- Other LPHA
- Private Agency
- School
- Self Or Family Member
- Other Community Partner
- Don't Know/ Not Sure
- Refused

3) Is the current care sufficient to meet most or all of your family's needs? 3

Questions 4 - 17? ☐ Yes ☐ No

Cancel Save

Interview Questions

1) Does JORDAN need Care Coordination services? Yes 1

2) Is anybody else providing Care Coordination services for JORDAN at this time? No 2

Cancel Save

Once you have completed **Interview Questions 1** through **3**, and select **“Yes”** or **“No”** for **“Client Requesting Information Only”**.

Client Requesting Information Only: ☒ Yes ☐ No

Describe information given to family (select as many as apply):

<input type="checkbox"/> Audiology	<input type="checkbox"/> Mental / Behavioral Health	<input type="checkbox"/> Primary Care
<input type="checkbox"/> Community Services	<input type="checkbox"/> Nutrition	<input type="checkbox"/> Public Health Services
<input type="checkbox"/> Developmental Screening	<input type="checkbox"/> Other	<input type="checkbox"/> School
<input type="checkbox"/> Financial Assistance	<input type="checkbox"/> Physical Therapy / Occupational Therapy	<input type="checkbox"/> Specialty Care
<input type="checkbox"/> Insurance		

If the client is requesting **“Information Only”**, click **“Yes”**. Upon clicking **“Yes,”** a list of HCP resources pops up. Mark all of the appropriate boxes and select the staff person from the drop down list who is providing the information.

If you mark **“No”** to the question **“Client Requesting Information Only”**, HCP resources window will **not** appear. Then proceed to answer **“Do you want to proceed to Intake Interview Questions 4 – 17?”** with **Yes** or **No**. If the family appears interested in continuing with the Interview Questions, or if you need to collect more data, click on **“Yes”**.

If the family is not interested in continuing, click on **“No”**. A pop-up will appear that asks **“Do you want to Close this Case”**. Choose **“Yes”** or **“No”**

★ Do you want to proceed to Intake Interview Questions 4-17? ☐ Yes ☒ No

★ **Case Closure**
Do you want to Close this Case? ☒ Yes ☐ No

Cancel Save

If you mark **“Yes”**, the pop-up box will expand and you will answer 2 more questions

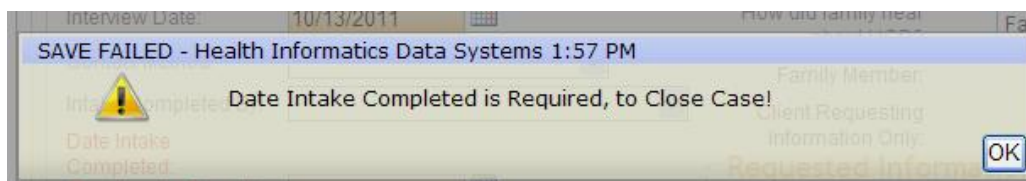
★ **Case Closure**
Do you want to Close this Case? ☒ Yes ☐ No
Case Closed After Information Given: ☒ Yes ☐ No
Case Closed By:

Cancel Save

Then, click on **Save**

HINT: You must click on **Save** before exiting the system, otherwise your entries will be lost.

After you click **Save**, if the **Date Intake Completed** field is **not** entered, you will see an error message:



Click **OK**, and then the system will take you back to the Intake Interview screen where you can enter the completed date. When all the required data has been entered, you will be able to save the file.

If you choose “**Yes**” to the question “**Do you want to proceed to Intake Interview Questions 4 – 17?**”, you may proceed to answer the rest of the questions.

HINT: The response options on the **Intake Interview** follow a skip pattern. Depending on the respondent’s response, you will be directed to the appropriate next data entry field.

HINT: If you answer “**Yes**” to questions 9, 10 or 11, further clarifying questions will appear.

Do you want to proceed to Intake Interview Questions 4-17?

☒ Yes ☐ No

4) A personal doctor or nurse is a health professional who knows White well and is familiar with White's health history. Do you currently have someone you think of as White's personal doctor or nurse?

4

5) In the last 6 months, did you or any doctor or nurse think White needed to see a specialist for her medical condition(s)?

5

Specialists are doctors like geneticists, surgeons, heart doctors, neurologists, or any other doctor that specializes in one area of medical care.

6) Was getting White in to see a specialist or other medical provider a problem for any reason?

7) In your opinion, are there good communication and working relationships among all of the people that provide services to White?

8) In your opinion, are you included and valued in the decisions made about White's health care?

9) During the past 6 months, did White miss school because of illness or injury?

Does Not Go To School 9

10) During the past 6 months, has White gone to a hospital emergency room?

10

11) Does White currently have any public or private health insurance?

11

This is an example of a skip pattern. If you answer **"No, Don't Know, or Refused"** to Question #5, you will be directed to skip Question #6

If you answer **"Yes"** to question 11, "Does client currently have any public or private health insurance?" Click on "Add New Insurance" for Question 12. Please select the type of insurance from a drop-down list.

11) Does Teddi currently have any public or private health insurance?

12) [Add New Insurance](#) [Close](#)

No Records Found.

Yes

11

If you enter “Medicaid”, please select the type of Medicaid from **Sub Type** drop-down list.

Type:

Sub Type:

SSI
Waiver
HMO
Straight

HINT: You may also enter and view the client’s insurance types by selecting “**Insurance**” on the “Tree”. The system will keep a list of all the insurance types entered, with the most recent showing at the top of the listings.

12) [Add New Insurance](#) [Close](#)

<u>Type</u>	<u>Date_Updated</u>	<u>Updated_By</u>
Medicaid - SSI	02/07/2012	jdoe
Tricare	02/07/2012	jdoe
Private Insurance	02/07/2012	jdoe
CHP+	02/07/2012	jdoe

13) Is Teddi's health insurance enough to pay for all of the health services she needs? 13

14) Is Teddi using any assistance, discount, or charitable programs that help pay for the medical services she currently needs? 14

15) Does anyone in your family need family support services?

Family support services include services such as: educational groups, support groups, respite care for the family, transition support, [ADD: other family support services], and support to your community.

16) Is getting the family support services that you need a problem for any reason? 16

17) Do you need extra help to manage the health care needs and services for Teddi?

Managing health care services includes things like making and keeping medical appointments, making sure Teddi's doctors or nurses have her most current medical information, or organizing Teddi's other specialists' appointments.

Record Information

Updated: 9/26/2011 6:33:00 PM
 Updated By: jdoe
 Created: 9/26/2011 3:18:00 PM

This is an example of a skip pattern. You will **only** see question 14 if you answer **"No/Don't Know/Not Sure/Refused"** to Question 13.

HINT: If you click on **Save** before all the questions have been answered, you may save the record and come back later to complete it. If you click on **Cancel**, you can escape the Interview without saving the information.

IMPORTANT: When you are completely finished entering the data from the Intake Interview, enter **"Date Intake Completed"** located in the Interview Question section.

Social Determinants of Health (SDoH)

Social Determinants of Health (SDoH) impact Health outcomes for children and youth with special health care needs. Therefore, it's important that you capture basic information about your clients. To input the data, click on **SDoH** in the "Tree" to access the screen.

HCP Option Menu ▼

Sunday, September 25, 2011

Main

Family

Add New

Bear, Mama (Mother)

Address

Action Plan

Assessment

Intake Interview

Communication

Contact Information

FIQ

Condition

IDs

Insurance

Notification

Race

SDoH

Home

Bear, Teddi
#80
HCP CHP

Social Determinants of Health

Percent of Poverty

No Percent of Poverty Records Entered

General Information Section

Single Parent Household:

Age Range of Biological Mother (at child's birth):

Highest Education Level in Child's Household:

Save

Click on SDoH.

Percent of Poverty Information Section

Percent of Poverty

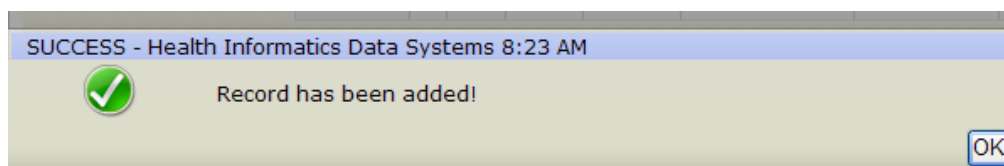
In the **Social Determinants of Health**, click on **Add New** to enter the Percent of Poverty data for the current year. You will enter data into the three orange highlighted fields. If numeric entries are unknown, you may select either **“Don’t Know/ Not Sure or Refused”**. The percent of poverty will not be calculated in that case. After you enter the data, click on **Add** to save.

Social Determinants of Health (SDoH)

Percent of Poverty

	ID	Year	Adults	Children	Poverty Percent	Date Updated	Updated By
Select	1	2012	1	3	111.85%	02/08/2012	jdoe

You will receive a message that the record has been added.



Clicking on **OK**, takes you back to the **Social Determinants of Health (SDoH)** screen.

After the percent of poverty has been added, you may review by clicking on **Select**. You will be able to edit the data, save your changes by clicking on **Update**, or remove the percent of poverty entry by clicking on **Delete**.

Social Determinants of Health (SDoH)

Percent of Poverty

Click here to Select.

	ID	Year	Adults	Children	Poverty Percent	Date Updated	Updated By
Select	1	2012	1	3	111.85%	02/08/2012	jdoe

You may exit SDoH page by clicking on **Cancel** or you may save your data by clicking on **Update**.

Social Determinants of Health (SDoH)

Percent of Poverty

Year: 2012

Number of Adults in Child's Household: 1

Number of Children in Child's Household: 3

Annual Income in Child's Household: 25000

% Poverty: 111.86%

Record Information

Updated: 2/8/2012 10:41:00 AM

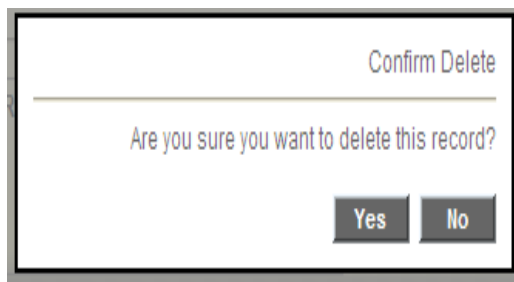
Updated By: jdoe

Created: 2/8/2012 10:41:00 AM

Click on Update to save your data.

Cancel Update Delete

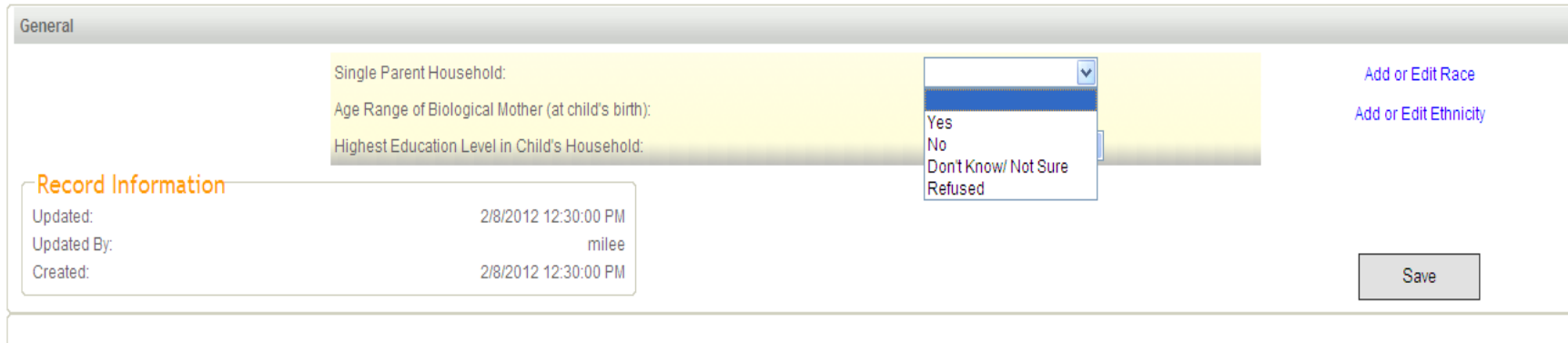
You may also delete your Social Determinants of Health data by clicking on **Delete**. You will see the Confirm Delete pop-up window.



General

Click on **Social Determinants of Health (SDoH)** to complete the **General** section. Answer all three of the questions on the **General** screen, using the drop down lists shown sequentially below:

Single Parent Household

A screenshot of the 'General' section of a form. The form has a title bar that says 'General'. Below the title bar, there are three questions: 'Single Parent Household:', 'Age Range of Biological Mother (at child's birth):', and 'Highest Education Level in Child's Household:'. Each question has a corresponding drop-down menu. The 'Single Parent Household' drop-down menu is open, showing options: 'Yes', 'No', 'Don't Know/ Not Sure', and 'Refused'. To the right of the questions, there are two links: 'Add or Edit Race' and 'Add or Edit Ethnicity'. At the bottom right, there is a 'Save' button. On the left side of the form, there is a 'Record Information' section with a table showing 'Updated:', 'Updated By:', and 'Created:' information.

Age Range of Biological Mother

General		
Single Parent Household:	Yes	Add or Edit Race
Age Range of Biological Mother (at child's birth):		Add or Edit Ethnicity
Highest Education Level in Child's Household:	16 Years Or Less 17 Years Or Older Don't Know/ Not Sure Refused	
Record Information		
Updated:	2/8/2012 12:30:00 PM	
Updated By:	milee	
Created:	2/8/2012 12:30:00 PM	
		<input type="button" value="Save"/>

Highest Education Level in Child's Household

General		
Single Parent Household:	Yes	Add or Edit Race
Age Range of Biological Mother (at child's birth):	16 Years Or Less	Add or Edit Ethnicity
Highest Education Level in Child's Household:	8th Grade Or Less Some High School High School Graduate Some College College Graduate Don't Know/ Not Sure Refused	
Record Information		
Updated:	2/8/2012 12:30:00 PM	
Updated By:	milee	
Created:	2/8/2012 12:30:00 PM	
		<input type="button" value="Save"/>

When you have answered all the questions, click on **Save**. Select **Add or Edit Race** and **Add or Edit Hispanic Ethnicity**. They are 2 separate fields which must be asked and entered.

General

Single Parent Household: Yes [Add or Edit Race](#)

Age Range of Biological Mother (at child's birth): 16 Years Or Less [Add or Edit Ethnicity](#)

Highest Education Level in Child's Household: 8th Grade Or Less

Record Information

Updated: 2/8/2012 12:30:00 PM

Updated By: milee

Created: 2/8/2012 12:30:00 PM

Click on the text to enter Race and Ethnicity of client.

Save

When you select **Add or Edit Race**, the system opens the following screen:

HCP Option Menu

Sunday, September 25, 2011

Main

Family

+

Add New

Home

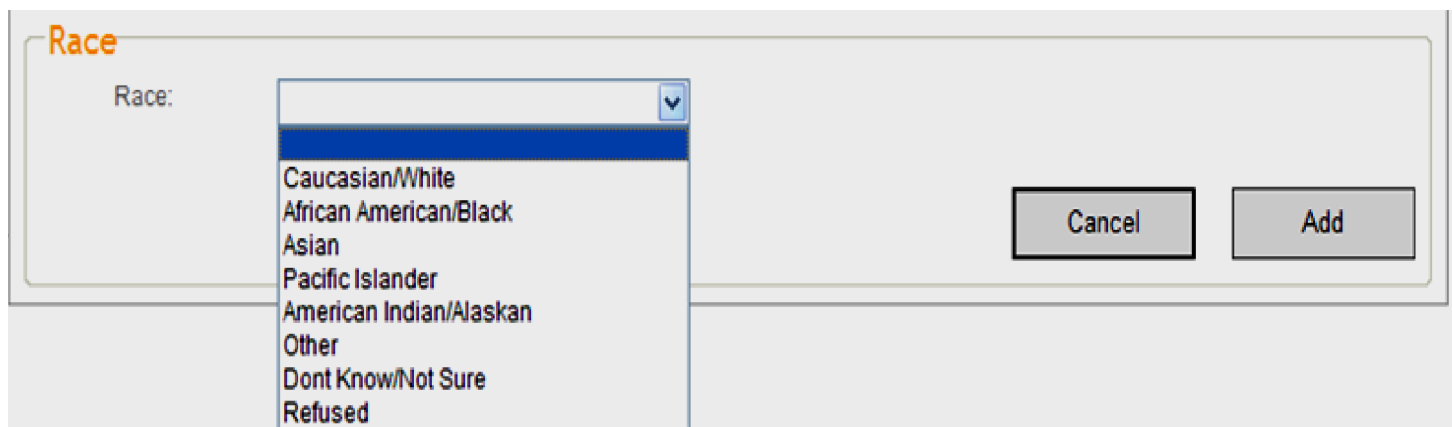
Bear, Teddi
#80
HCP CHP

Race [Add New](#)

No Records Found.

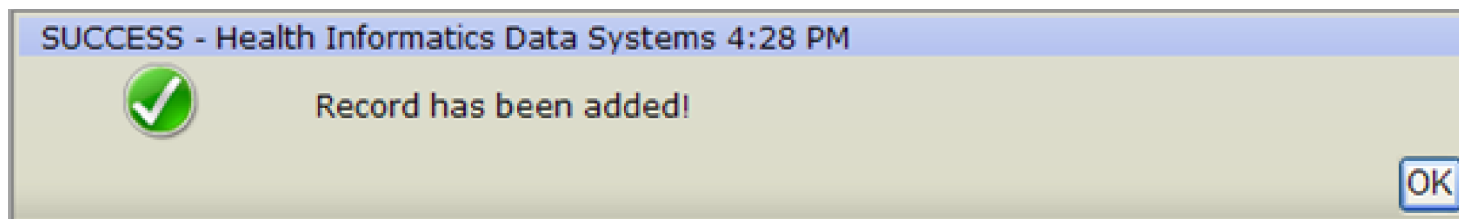
Click on Add New.

Select an option from the drop down box and click on **Add** to save.



The screenshot shows a form titled "Race" in orange text. Below the title is a label "Race:" followed by a dropdown menu. The dropdown menu is open, displaying a list of race options: "Caucasian/White", "African American/Black", "Asian", "Pacific Islander", "American Indian/Alaskan", "Other", "Dont Know/Not Sure", and "Refused". To the right of the dropdown menu are two buttons: "Cancel" and "Add".

You will see the following message when your data has been added.



Click **OK** to continue.

When you select **Add or Edit Ethnicity**, the system opens the following screen.

Main
Family
Add New
Bear, Mama (Mother)
Address
Action Plan
Assessment
Intake Interview
Communication
Contact Information
Condition

Social Determinants of Health (SDoH)

Ethnicity (from Main)

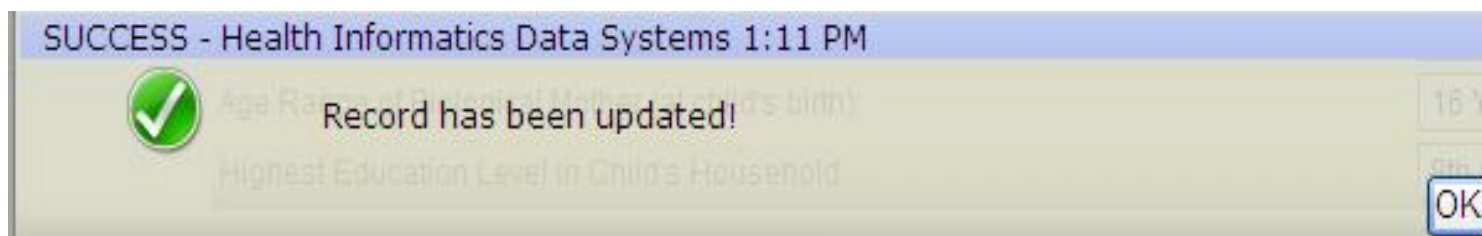
Hispanic Ethnicity: Yes

Update

No
Refused
Unknown
Yes

Updated by: jdoe - 2/8/2012 10:38:00 AM

You will see the following message when your data has been updated.



Click **OK** to return to the **Add or Edit Race** and **Add or Edit Ethnicity** screen. Click on any subject on the **HCP Option Menu** to exit the **Race and Ethnicity** screen.

Assessment

To enter the date which the client's assessment was completed, select **Assessment** from the **HCP Option Menu**. Enter the date and select the person who completed the assessment from the drop down list. Click on **Add** when you are ready to save.

The screenshot displays the Integrated Data System (IDS) interface. At the top, there are tabs for FAVORITES, LAST 10, and CLOSE ALL TABS. The main header shows the IDS logo and a user profile for Jane Doe. Below the header, there are navigation tabs: HOME, SEARCH, and REPORTS. The HCP Option Menu is open, showing a list of options: Main, Family, Address, Action Plan, Assessment, Intake Interview, and Communication. The 'Assessment' option is highlighted. The form for the Assessment is displayed, showing the date '10/14/2011' and the name 'Prentiss, Paula, Family C'. There are 'Close' and 'Add' buttons at the bottom right. Two callouts are present: one pointing to the 'Assessment' option in the menu with the text 'Click on Assessment to enter date.', and another pointing to the 'Add' button with the text 'Click Add to save.'

When you have reviewed the assessment, click on **Add New**.

HCP Option Menu ▼

Friday, October 14, 2011

Main
Family
+ Add New
Address
Action Plan
Assessment
Intake Interview
Communication
Contact Information
Condition
IDs
Insurance
Notification

Home | Locks, Goldi #557 HCP DCP | Locks, Goldi #557 HCP DCP | Wolf, Big B. #559 HCP DCP

Assessment

Date Assessment Completed: 10/14/2011

Assessment Completed By: Prentiss, Paula, Family Cr

Assessment Review

Currently No Reviews

Add New

Record Information

Updated: 10/14/2011 8:35:00 AM
Updated By: jdoe
Created: 10/14/2011 8:35:00 AM

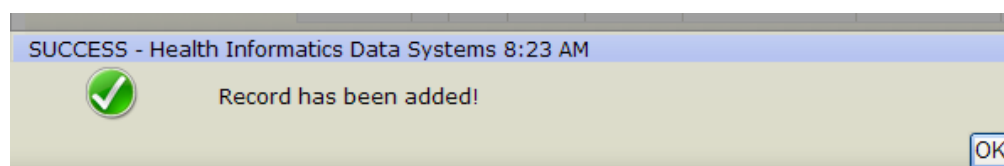
Close Update Delete

Click here to enter Date Assessment Reviewed.

Enter the date of the assessment review date and the name of the reviewer from the drop down list.

The screenshot shows the 'Assessment Review Detail' form within the CYSHCN Data System. On the left is a sidebar with the 'HCP Option Menu' and a list of navigation items: Main, Family, Add New (with a plus icon), Address, Action Plan, Assessment, Intake Interview, Communication, Contact Information, Condition, IDs, Insurance, Notification, and Race. The main content area has a title bar with 'Home' and three open tabs: 'Locks, Goldi #557 HCP DCP', 'Locks, Goldi #557 HCP DCP', and 'Wolf, Big B. #559 HCP DCP'. The 'Assessment' section contains two fields: 'Date Assessment Completed:' with a date picker set to '10/14/2011' and 'Assessment Completed By:' with a dropdown menu showing 'Prentiss, Paula, Family Ct'. Below this is the 'Assessment Review Detail' section with 'Date Assessment Reviewed:' set to '03/01/2012' and 'Assessment Reviewed By:' with a dropdown menu showing 'Jackson, Mary, Social Work'. At the bottom right are 'Close' and 'Add' buttons.

Then click **Add** to save the assessment review data. You will receive a message that the record has been saved.



Clicking on **OK**, takes you back to the **Assessment** screen.

Action Plan

To enter the date when the initial action plan was completed, select **Action Plan** from the **HCP Option Menu**.

The screenshot displays the CYSHCN Data System interface. On the left is the 'HCP Option Menu' with a warning icon and the text 'Pending System Messages'. Below this is the date 'Friday, October 14, 2011' and a navigation menu with links: 'Main', 'Family', 'Address', 'Action Plan', and 'Assessment'. The 'Action Plan' link is highlighted. A blue speech bubble points to the 'Action Plan' link with the text 'Click Action Plan to begin.' The main content area shows the 'Action Plan' form. At the top of the form is the title 'Action Plan' in orange. Below the title are two tabs: 'Home' (selected) and 'Action Plan'. The 'Home' tab contains two sub-tabs: 'baca, test #465 HCP BAC' and 'TEST, NBH #367 NBH CNH'. The form has two input fields: 'Date Initial Action Plan Completed:' with a date picker icon, and 'Initial Plan Completed By:' with a dropdown menu. At the bottom right of the form are two buttons: 'Close' and 'Add'.

Enter the date you completed the action plan with the client's family, and select the person completing the action plan from the drop down list.

Click on **Add** when you are ready to save.

Home

baca, test #465 HCP BAC

TEST, NBH #367 NBH CNH

Action Plan

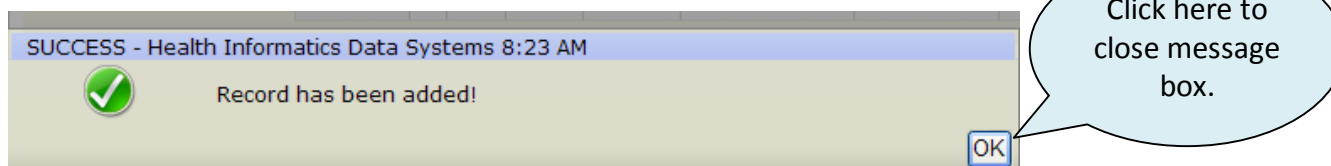
Date Initial Action Plan Completed: 10/19/2011

Initial Plan Completed By: Prentiss, Paula, Family Coordinate

Close Add

Click here to save.

A message that the record has been saved pops up.



Clicking on **OK**, takes you back to the **Action Plan** screen.

In order for a client to remain active, the action plan needs to be reviewed with the client and family every six months or less. When you have reviewed the action plan, click on **Add New** to enter your date. Enter the date of the review and the name of the reviewer from the drop down list. The system will save all action plan review dates in sequential order.

HCP Option Menu

Pending System Messages

Friday, October 14, 2011

Main
Family
 Add New
Address
Action Plan
Assessment
Intake Interview
Communication
Contact Information
Condition
IDs
Insurance

Home | baca, test #465 HCP BAC | TEST, NBH #367 NBH CNH

Action Plan

Date Initial Action Plan Completed: 10/19/2011

Initial Plan Completed By: Prentiss, Paula, Family Coordinatc

Action Plan Review

Currently No Reviews

Add New

Record Information

Updated: 10/14/2011 11:17:00 AM
Updated By: cjlow
Created: 10/14/2011 11:17:00 AM

Close **Update** **Delete**

Click here to add action plan review date.

Action Plan

Date Initial Action Plan Completed: 10/19/2011

Initial Plan Completed By: Prentiss, Paula, Family Coordinatc

Action Plan Review Detail

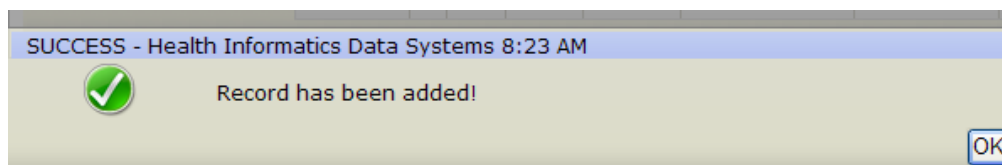
Date Action Plan Reviewed: 10/25/2011

Action Plan Reviewed By: StaffLastName, StaffFirstNan

Close Add

Click Add to save.

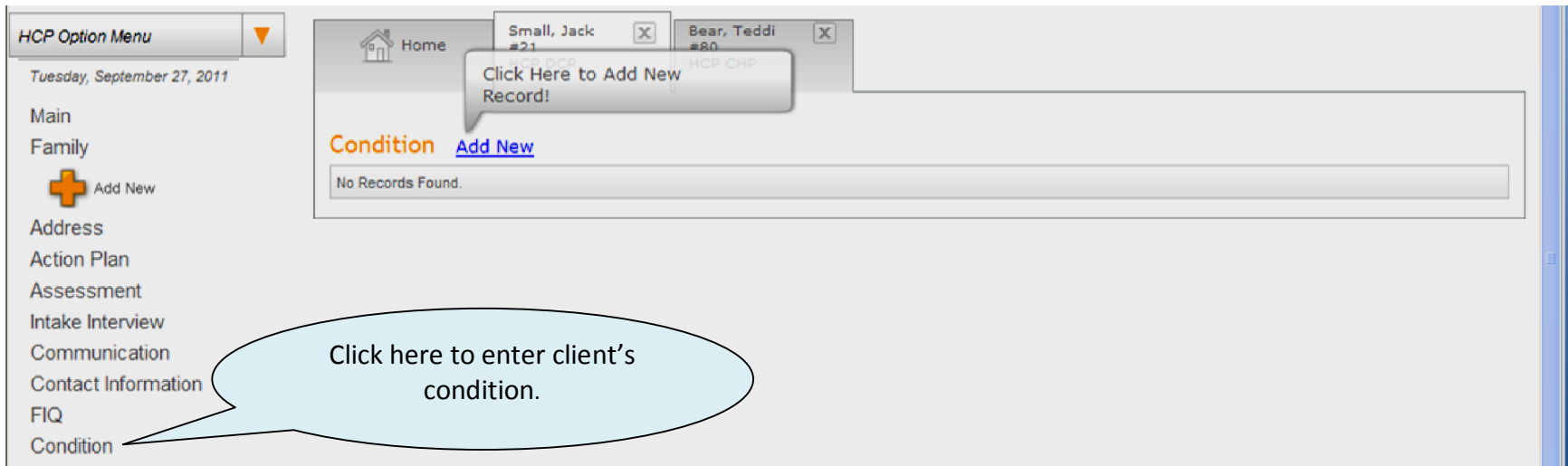
You will receive a message that the record has been saved.



Clicking **OK** takes you back to the **Action Plan** screen.

Medical Condition

To record a client's medical condition, click on **Condition** from the HCP Option Menu. The **Condition** screen will pop up. Click on **Add New**.



Click on **Add New** to open the screen.

The screenshot shows the CYSHCN Data System interface. At the top, there are two tabs: 'Small, Jack #21 HCP DCP' and 'Bear, Teddi #80 HCP CHP'. Below the tabs, there is a 'Condition' section with a 'Select' dropdown menu. The dropdown menu is open, displaying a list of medical conditions. The list includes: Allergies (severe), Arthritis or other joint problems, Asthma, Attention deficit disorder or attention deficit hyperactivity disorder(ADD or ADHD), Autism Spectrum Disorders, including Asperger's syndrom, pervasive developmental disorder, or other autism spectrum disorder, Blood problems (such as anemia, sickle cell disease, hemophilia), Brain injury (aquired), Brain injury (traumatic), Cardiac defect, Cardiac disease, Cerebral palsy, Chromosomal disorders & genetic syndromes (other than Down syndrome), Chronic ear infections, Circulatory system problems (excluding cardiac problems), Cleft lip and/or palate, Congenital anomalies, Connective Tissue Disorders (such as osteogenesis imperfecta), Cystic fibrosis, Degenerative neuromuscular disorders (including muscular dystrophy), Developmental delay - global, Developmental delay-cognitive, Developmental delay-motor, Developmental delay-speech, Developmental disability, Diabetes, Down Syndrome, Eating disorders, Endocrine disorder (other than diabetes), and Epilepsy or seizure disorder. The list is scrollable, and the 'Select' dropdown is currently set to 'Allergies (severe)'. On the left side of the interface, there are labels for 'Diagn', 'Category', and 'Type'. At the bottom left, there is a partially visible label: 'Department of Public Health, the State makes'.

Select a condition from the drop down box. You may enter up to five medical conditions for every client.

You may enter an ICD-Code for the category and/or a diagnosis type in the ICD9 Code box.

Home | Small, Jack #21 HCP DCP | Bear, Teddi #80 HCP CHP

Condition

Select: Cardiac disease

ICD9 Code

Category:
 Type:
 ICD9:

Search: ICD9

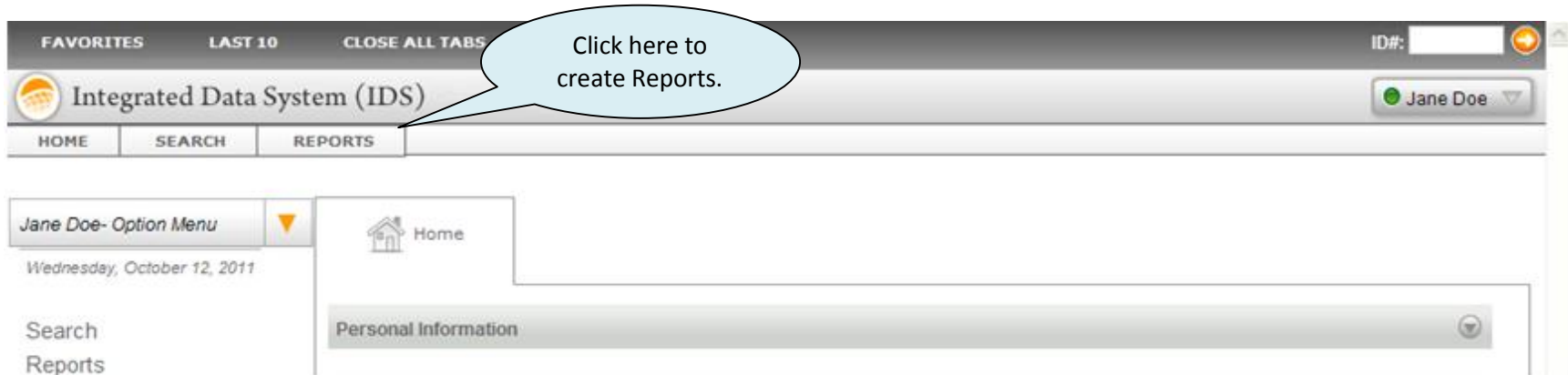
Close Add

Category list (from screenshot):
 Circulatory System 390-459.9
 Conditions Originating in Perinatal Period 760-779.9
 Congenital Anomalies 740-759.9
 Digestive System 520-579.9
 Diseases of Blood & Blood Forming Organs 280-289.9
 E Codes - External Causes of Injury and Poisoning E01-E999.9
 Endocrine, Nutritional and Metabolic Diseases and Immunity Disorders 240-279.9
 Genitourinary System 580-629.9
 Infectious and Parasitic Diseases 001-139.9
 Injury & Poisoning 800-999.9
 Mental Disorders 290-319
 Musculoskeletal & Connective Tissue 710-739.9
 Neoplasms 140-239.9
 Nervous System & Sense Organs 320-389.9
 Pregnancy, Childbirth, & Puerperium 630-677
 Respiratory System 460-519.9
 Skin & Subcutaneous Tissue 680-709.9
 Symptoms, Signs & Ill Defined Conditions 780-799.9
 V Codes - Factors Influencing Health Status & Contact with Health Services V01-V82.9

Select the diagnosis category from the drop down list, and click on **Add** to save. You may also enter a more specific diagnosis type by opening the **Type** drop down list and selecting an option.

Reports

To access and create reports, click on **Reports** in the **HCP Option Menu**. Select the report you want to run from the drop down list. The available reports and their descriptions are located in Appendix III of the manual. After you select a report name, a pop-up window may appear that asks you to enter information.



In our example, “CRCSN Current”, the report requires a “Start Date” and an “End Date”. The “Start Date” is the earliest CRCSN Notification Date, and the End Date is the latest CRCSN Notification Date to include in the report.

Integrated Data System (IDS) - Reports

Program: Health Care Program for Children with Special Needs

Report: CRCSN Current

Date Range

Start Date: 11/01/2011

End Date: 11/30/2011

Submit

Clear

Select here to Submit.

Enter the 1st and last days of the month for your “Date Range” and click on “Submit” to begin report processing. For best results when running the CRCSN Current Report, create a separate report for each month individually.

To View, Print or Save the report, select **Acrobat(PDF) File** from the drop down box and click on “Export”.

Hint: Increase brightness and contrast of screen prints so they are readable using format picture options.

Integrated Data System (IDS) - Reports

Program: Health Care Program for Children with Special Needs

Report: CRCSN Current

Date Range: Start Date: 11/01/2011, End Date: 11/30/2011

Submit Clear

100%

Select a format

- Select a format
- XML file with report data
- CSV (comma delimited)
- Acrobat (PDF) file
- MHTML (web archive)
- Excel
- TIFF file
- Word

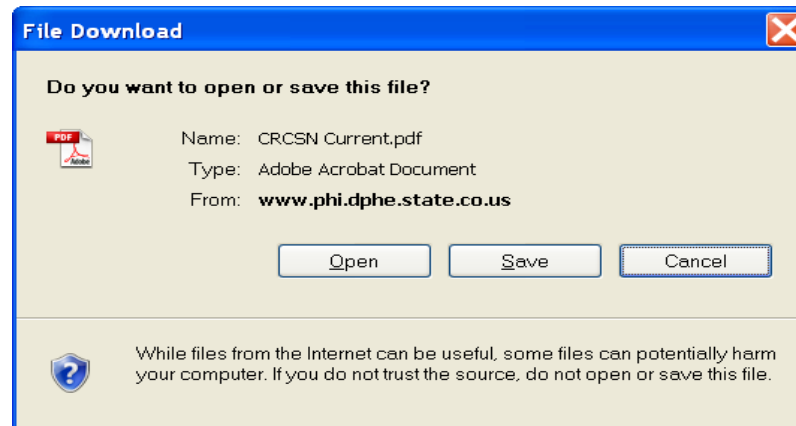
Click here to Export.

CRCSN Notifications Current

Report Date Range: 11/1/2011 thru 11/30/2011

Site	NA ID	DOB	Gender	Household Address City, State Zip	Language	Interpreter Needed	Contact Name Contact County
Adams, Samuel	275555	05/10/2011	M	4300 Cherry Creek Dr South Denver, CO 80246	English	No	ADAMS, SAMUEL (720) 111-1234 Denver
<p>Admitted Date: Aug 10 2011 Hospital: Medical Center of Aurora South # Days in Hospital: 001 ICD9 Code: 745.19 ICD9 Description: Cardiac; other specified transposition of great ve</p>							
<p>Admitted Date: Aug 10 2011 Hospital: Medical Center of Aurora South # Days in Hospital: 001 ICD9 Code: 747.0 ICD9 Description: Circulatory sys; patent ductus arteriosus</p>							
Lopez, Mary	275586	07/26/2011	F	Sanchez, Ramona 123 5th Street Denver, CO 80202	English	No	SANCHEZ, RAMONA (303) 555-1212 Denver
<p>Admitted Date: Jul 26 2011 Hospital: The Childrens Hospital - Denver # Days in Hospital: 028 ICD9 Code: 751.2 ICD9 Description: Intestine, lig/rectum/anal canal; atresia/stenosis</p>							
<p>Admitted Date: Jul 26 2011 Hospital: The Childrens Hospital - Denver # Days in Hospital: 028 ICD9 Code: 747.69 ICD9 Description: Peripheral vascular system, other specified vessels</p>							
<p>Admitted Date: Jul 26 2011</p>							

Click Acrobat(PDF)File.




You may save the document or open and print it from here. To save the document, click on “Save”, and select the location where you want to save the file.

CRCSN Current[1].pdf - Adobe Acrobat Professional

File Edit View Document Comments Forms Tools Advanced Window Help

Create PDF Combine Files Export Secure Sign Forms Review & Comment

113 / 113 91.2% Find

 **CRCSN Notifications Current**
Report Date Range: 11/1/2011 thru 11/30/2011

Site	Name ID	DOB Notification Date and Details	Gender	Household Address City, State Zip	Language Interpreter Needed	Contact Name Contact County
	WATER, MERCURY 888888	07/07/2011	F	WATER, MARS 111 11TH STREET WINDSOR, CO 80550	English No	WATER, MARS (999) 444-7777 Weld
	11/15/2011	Admitted Date: Jul 12 2011 Hospital: The Childrens Hospital - Denver # Days in Hospital: 003 ICD9 Code: 746.4 ICD9 Description: Aortic valve; insufficiency/bicuspid aortic valve				

Site Total: 21

Report Total: 250

CRCSN Notifications Current - Run Date: 2/9/2012

Page 113 of 113

CTRL + End Key takes you to the bottom of the file.

Integrated Data System (IDS) - Reports Jane Doe

Program: Health Care Program for Children with Special Needs

Report: **CRCSN Current**

Date Range: Start Date: 11/01/2011 End Date: 11/30/2011

Submit Clear

100% Select a format Export

CRCSN Notifications Current
Report Date Range: 11/1/2011 thru 11/30/2011

Site	Name ID	DOB	Gender	Household Address City, State Zip	Language Interpreter Needed	Contact Name Contact County
Family Voices						
	ADAMS, SAMUEL 278955	08/10/2011	M	Adams, Hawi 4300 Cherry Creek Dr South Denver, CO 80246	English No	ADAMS, HAWI (720) 111-1234 Denver
	<p><u>Date of Notification:</u> 11/15/2011</p> <p>Admitted Date: Aug 10 2011 Hospital: Medical Center of Aurora South # Days in Hospital: 001 ICD9 Code: 745.19 ICD9 Description: Cardiac; other specified transposition of great ve</p> <p>Admitted Date: Aug 10 2011 Hospital: Medical Center of Aurora South # Days in Hospital: 001 ICD9 Code: 747.0 ICD9 Description: Circulatory sys; patent ductus arteriosus</p>					
	LOPEZ, MARY 278586	07/26/2011	F	Sanchez, Ramona 123 5th Street Denver, CO 80202	English No	SANCHEZ, RAMONA (303) 555-1212 Denver
	<p><u>Date of Notification:</u> 11/15/2011</p> <p>Admitted Date: Jul 26 2011 Hospital: The Childrens Hospital - Denver # Days in Hospital: 028 ICD9 Code: 751.2 ICD9 Description: Intestine, ig/rectum/anal canal; atresia/stenosis</p> <p>Admitted Date: Jul 26 2011 Hospital: The Childrens Hospital - Denver # Days in Hospital: 028 ICD9 Code: 747.69 ICD9 Description: Peripheral vascular system, other specified vessels</p> <p>Admitted Date: Jul 26 2011</p>					

Time Logged In: 12/5/2011 9:33:00 PM

IDS Data System
Reports
Logout

Click here to open the Home Screen.

To leave the Reports Menu and go back to the Home screen, scroll to the top of the page. Move your mouse pointer to your User Name, and you'll see a drop down list of options to select. Click on "IDS Data System" to return to the **Home** screen.

Inactivating a Client Record

It is important to inactivate a client's record when they do not have a current action plan for HCP Care Coordination. You can always open the client's record if he/she needs further Care Coordination from HCP. All the data is saved when you inactive a record.

When you are ready to inactivate a client in the *CYSHCN Data System*, open the client's record. Click on **Update**.

The screenshot displays the CYSHCN Data System interface. On the left is a sidebar with the 'HCP Option Menu' and a 'Pending System Messages' section with a warning icon. Below this are links for 'Main', 'Family', 'Add New' (with a plus icon), and 'Address'. The main content area features a top navigation bar with 'Home' and several open tabs: 'baca, test #465 HCP BAC', 'TEST, #367 NBH CH', and 'JeffCo, FN'. A tooltip points to the 'JeffCo, FN' tab with the text 'Click Here to Update Client Record!'. The client record for 'JEFFCO, FN' is shown, including 'DOB: 1/1/2000 11 yo #50', 'HCP Denver (DHCP)', 'Registration Date: 02/07/2007', and an 'Update' link. The status is 'Active' with a green shield icon, and there is an 'Add to Favorites...' button with a star icon.

The following screen opens.

Home | baca, test #465 HCP BAC | TEST, NBH #367 NBH CNH | Lion, Fierce #97 HCP DCP

Client

Last Name: JeffCo | First Name: FN | Middle Name: |
AKA Last Name: | AKA First Name: | AKA Middle Name: |

Birth Date: 01/01/2000 | Active: ☒
Hispanic Ethnicity: |

Record Information

Updated: 9/17/2011 3:40:00 PM
Updated By: ckwernel
Created: 9/17/2011 3:39:38 PM

Cancel | Update | Delete

To inactivate the client's record, click on the Active box to remove the check mark. When you click on Update, the record will be inactivated.

The system will ask you to enter the reason the record is being inactivated. Select the reason from the drop down list in the **Inactive Reason** field, and then click on **Update** to save.

The screenshot displays the 'Client' record form in the CYSHCN Data System. At the top, there is a navigation bar with a 'Home' button and four tabs: 'baca, test #465 HCP BAC', 'TEST, NBH #367 NBH CNH', 'Lion, Fierce #97 HCP DCP', and 'JeffCo, FN #50 HCP DCP'. The 'Client' section contains fields for 'Last Name' (JeffCo), 'First Name' (FN), 'Middle Name', 'Suffix', and 'Gender'. Below these are fields for 'AKA Last Name', 'AKA First Name', and 'AKA Middle Name'. The 'Birth Date' is set to 01/01/2000, and 'Hispanic Ethnicity' is a dropdown menu. The 'Active' checkbox is unchecked. The 'Inactive Reason' dropdown menu is open, showing a list of reasons: 'HCP CC Not Needed Anymore' (highlighted), 'Over-Aged', 'Family Request', 'Refused Further HCP CC', 'Transferred CC To PCP/ Medical Home', 'Lost', 'Non-Compliant', 'Deceased', 'Don't Know/ Not Sure', and 'Refused'. A 'Cancel' button is visible next to the dropdown. The 'Record Information' section shows 'Updated: 9/17/2011 3:40:00 PM', 'Updated By: ckwernel', and 'Created: 9/17/2011 3:39:38 PM'.

Last Name	First Name	Middle Name	Suffix	Gender
JeffCo	FN			

AKA Last Name	AKA First Name	AKA Middle Name

Birth Date: 01/01/2000
Hispanic Ethnicity:
Active: ☐
Inactive Reason: *
HCP CC Not Needed Anymore
Over-Aged
Family Request
Refused Further HCP CC
Transferred CC To PCP/ Medical Home
Lost
Non-Compliant
Deceased
Don't Know/ Not Sure
Refused

Record Information
Updated: 9/17/2011 3:40:00 PM
Updated By: ckwernel
Created: 9/17/2011 3:39:38 PM

The record now shows the client as **Inactive**. Inactive clients will appear in the Search Results window with the red **In-Active** symbol and only if the **All Site and All Status** were checked before clicking on **Search**.

HCP Option Menu

Pending System Messages

Friday, October 14, 2011

Main
Family
 Add New
Address

Home	baca, test #465 HCP BAC	TEST, NBH #367 NBH CNH	Lion, Fierce #97 HCP DCP	JeffCo, FN #50 HCP DCP
------	-------------------------------	------------------------------	--------------------------------	------------------------------

JEFFCO, FN DOB: 1/1/2000 11 yo #50 [Update](#)

HCP Denver (DHCP)
Registration Date: 02/07/2007

In-Active

Add to Favorites...

Client Search

Client ID#:

Birth Date: Order:

Last Name:

ID Types:

Phone Number: () -

First Name:

ID:

☒ All Site ☒ All Status

Relationship Search

Type:

Last Name: First Name:

Reactivating a Client Record

Reactivating an HCP Care Coordination client's record is just a reversal of the client inactivation process.

Home | baca, test #465 HCP BAC | TEST, NBH CA | JEFFCO, FN #50 HCP DCP

JEFFCO, FN DOB: 1/1/2000 11 yo #50 [Update](#)

HCP Denver (DHCP)
Registration Date: 02/07/2007

In-Active

Add to Favorites...

When you click on **Update** and enter the Update screen, you will check the Active box to reactivate the record. The **Inactive Reason** field no longer appears on the screen.

Client

Last Name: JeffCo First Name: FN Middle Name: Suffix: Gender: ☐

AKA Last Name: AKA First Name: AKA Middle Name:

Birth Date: 01/01/2000 Active: ☒

Hispanic Ethnicity: ☐

Record Information

Updated: 10/14/2011 12:45:00 PM
Updated By: cjlw
Created: 9/17/2011 3:39:38 PM

Cancel Update Delete

Check this box to reactivate the client, and click Update to save.

System Generated Items

Communications:

The **CYSHCN Data System** only displays system generated communications and converted HCP CHIRP data. (Example: Change in client status or system produced letters.) No direct user input. To exit from the screen, click on **Cancel**.

HCP Option Menu ▼

Pending System Messages

Friday, October 14, 2011

Main

Family

+ Add New

Address

Action Plan

Assessment

Intake Interview

Communication

Contact Information

Home | boca, test #485 HCP BAC | TEST, NBH #387 NBH CNH | Lion, Pierce #57 HCP DCP | JeffCo, FN #50 HCP DCP

Communication

Date: 10/14/2011

Duration: 15 Minutes

Family Member: [Dropdown]

Type: System Generated

Reason: Person Status Inactive

Result: Successful - System Generated

Record Information

Updated: 10/14/2011 12:45:00 PM

Updated By: cjlw

Created: 10/14/2011 12:45:00 PM

Cancel

The type of Communication shows as "System Generated".

Notifications:

This screen shows notifications from other data systems, such as CRCSN, site transfers, or electronic birth certificate revisions. You may view the notifications, but you cannot enter any data in the screen. Most notifications will have an Action request with them (e.g. "Please View") and are updated when viewed. To view notifications, first click on the "Pending System Messages" link in the top left area of the screen.



If you have not previously viewed a notification, you can load the client file from the screen by clicking on **Load** to the left of the date of the notification.

A screenshot of the "Pending System Messages" table. The table has columns: Date, Site, Patient ID, Name, County, and Zip. There are four rows of data. Each row has a "Load" link to the left of the date. A callout bubble points to the "Load" link in the first row with the text "You can load the client by clicking here." The table is titled "Pending System Messages" and has an "Actions" dropdown menu. A footer note states: "* Red Rows Indicate System Messages Received in the Last Week".

	Date	Site	Patient ID	Name	County	Zip
Load	10/10/2011 12:00:00 AM	HCP Baca County Public Health	422	Sanderson, Samuel	Eagle	80808
Load	10/10/2011 12:00:00 AM	HCP Clear Creek County Public Health	422	Sanderson, Samuel	Eagle	80808
Load	10/6/2011 12:00:00 AM	HCP Baca County Public Health	465	baca, test		
Load	10/4/2011 9:40:00 AM	NBH CDPHE Newborn Hearing Screening Program	387	TEST, NBH		

When you load a client, the following screen appears;

HCP Option Menu

Pending System Messages
Thursday, October 20, 2011

Main
Family
+ Add New
Baxter, Joe (Father)

Home | Sanderson, Samuel #422 HCP EAG

Notification

	Category	Date	Action	Reason	Type	Updated
View	Notification	10/10/2011	Viewed	Transfer between HCP Sites	Transfer Notification	tuser
View	Notification	10/10/2011	Please View	Transfer between HCP Sites	Transfer Notification	TUSER

Home | Adams, Samuel #686 HCP TRI

Notification Hide

Date: 10/20/2011 [Mark as Viewed](#)
 Type: Transfer Notification
 Reason: Transfer between HCP Sites
 Family Member: Source: Baca County Public Health
 Notes: Duration: 15 Minutes
 Result: Successful Transfer
 Transferred From: HCP - Baca County Public Health
 Transferred To: HCP - TriCounty Health Dept
 NOTE: Please update the address to reflect the new site!

Record Information

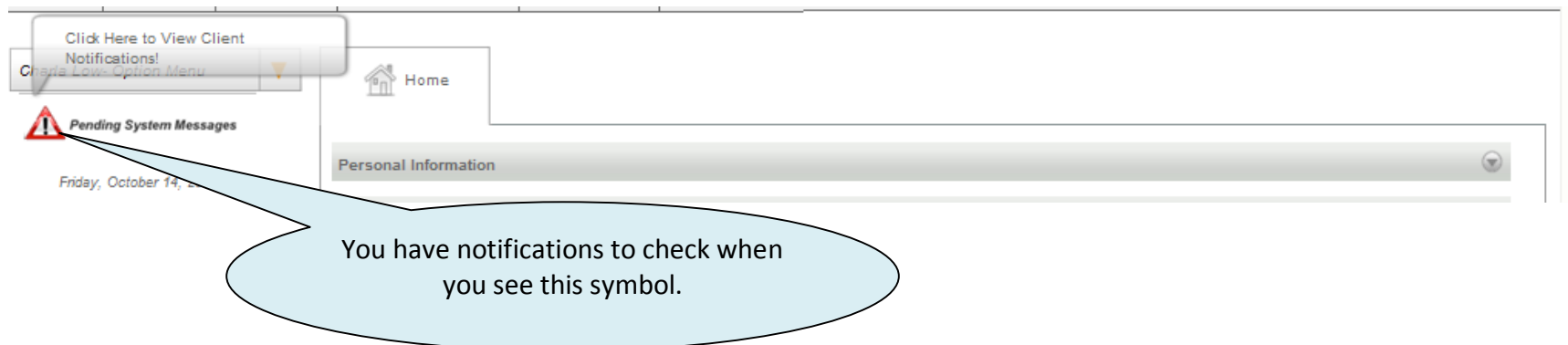
Updated: 10/20/2011 9:32:00 AM
 Updated By: tuser
 Created: 10/20/2011 9:32:00 AM

Close

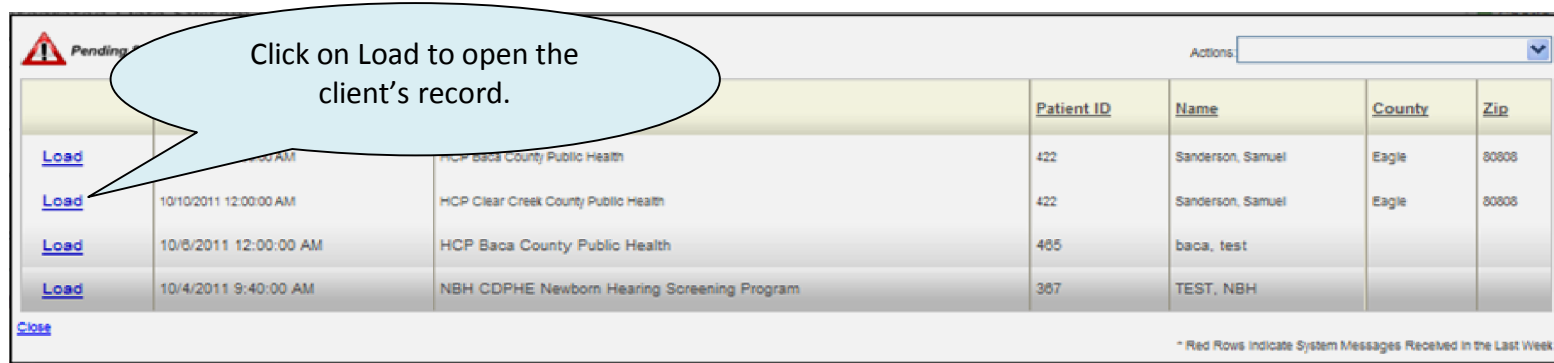
Select **Close** when you have read the notification.

Colorado Responds to Children with Special Needs (CRCSN)

The Colorado Hospital Association releases data to the state every month on children who have been discharged from the hospital with a diagnosis of a reportable condition. If a child's family lives in your site's territory, your office will receive a system notification. The **Pending System Messages** symbol alerts your office that you have notification(s).



Click on the **Pending System Messages** symbol to view your site's notifications.



Pending System Messages

Friday, October 14, 2011

Main
Family
Add New
VELASCO, LARIZA (Other)
Address
Action Plan
Assessment
Intake Interview
Communication
Contact Information
Condition
IDs
Insurance
Notification
Race
SDoH
Transfer

Notification

	Category	Date	Action	Reason	Type	Updated
View	Notification	02/04/2011	Please Reply	Notification - Unknown Child	CRCSN Notification	NEST

1. Click on Notification

2. Type equals CRCSN Notification.

3. Click on View to see the details of the CRCSN notification.

The following is a typical CRCSN notification record.

Click here to record
your follow-up to the
notification.

Notification				Hide
Date:	11/15/2011	Source:	CRCSN - Colorado Responds to Children	Reply to Notification
Type:	CRCSN Notification	Duration:	15 Minutes	
Reason:	Notification - Unknown Child	Result:	Successful - HCP Notified	
Family Member:				
Admitted Date: Aug 10 2011 Hospital: Medical Center of Aurora South # Days in Hospital: 001 ICD9 Code: 745.19 ICD9 Description: Cardiac; other specified transposition of great ve				
Admitted Date: Aug 10 2011 Hospital: Medical Center of Aurora South # Days in Hospital: 001 ICD9 Code: 747.0 ICD9 Description: Circulatory sys; patent ductus arteriosus				
Record Information				
Updated:	11/28/2011 3:17:00 PM			
Updated By:	NEST			
Created:	11/28/2011 3:17:00 PM			
Reply				
Date:	12/05/2011			
Type:	2 - Phone Call			
Reason:	Notification - Unknown Child			
Result:	Care Coordination			
<input type="button" value="Cancel"/> <input type="button" value="Add"/>				
<input type="button" value="Close"/>				

When you have completed your follow-up on the notification, click on **Reply to Notification**. You must reply to close a CRCSN notification.

The screenshot shows a web-based form titled "Reply" with a "Hide" button in the top right corner. The form contains the following fields:

- Date:** A date picker showing "09/28/2011".
- Type:** A dropdown menu with "Phone Call" selected.
- Reason:** A dropdown menu with "Notification - Unknown Child" selected.
- Duration:** A dropdown menu with "1 Hour" selected.
- Family Member:** A dropdown menu.
- Result:** A dropdown menu with "Left Message" selected.
- Notes:** A text area containing the placeholder text "asldkgjhbni09uoj".

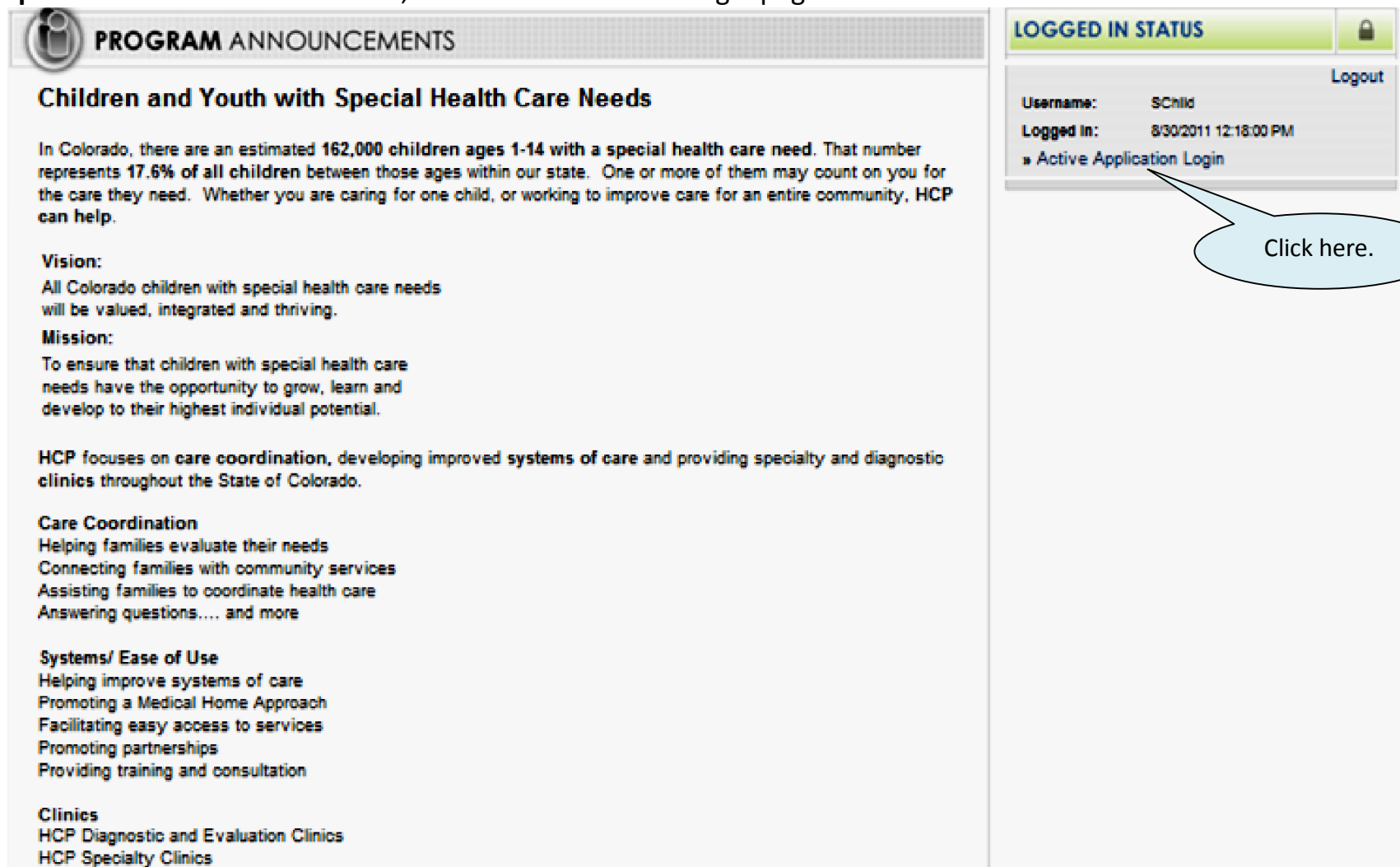
At the bottom of the form are three buttons: "Cancel", "Add", and "Close".

Two instructional callouts are present:

- A callout pointing to the "Add" button that says: "Fill in all the fields. Click on Add to save."
- A callout pointing to the "Close" button that says: "Click here to close the notification."

HCP Program Announcements

HCP Program Announcements will appear when you click on the Programs Supported “**Children and Youth with Special Health Care Needs**” link, found on the CYSHCN login page.



PROGRAM ANNOUNCEMENTS

Children and Youth with Special Health Care Needs

In Colorado, there are an estimated 162,000 children ages 1-14 with a special health care need. That number represents 17.6% of all children between those ages within our state. One or more of them may count on you for the care they need. Whether you are caring for one child, or working to improve care for an entire community, HCP can help.

Vision:
All Colorado children with special health care needs will be valued, integrated and thriving.

Mission:
To ensure that children with special health care needs have the opportunity to grow, learn and develop to their highest individual potential.

HCP focuses on care coordination, developing improved systems of care and providing specialty and diagnostic clinics throughout the State of Colorado.

Care Coordination
Helping families evaluate their needs
Connecting families with community services
Assisting families to coordinate health care
Answering questions..... and more

Systems/ Ease of Use
Helping improve systems of care
Promoting a Medical Home Approach
Facilitating easy access to services
Promoting partnerships
Providing training and consultation

Clinics
HCP Diagnostic and Evaluation Clinics
HCP Specialty Clinics

LOGGED IN STATUS

Logout

Username: SChild
Logged in: 8/30/2011 12:16:00 PM
» [Active Application Login](#)

Click here.

To enter the data system, simply click on **Active Application Login**.

Transferring a Client

To transfer a client to another HCP site, start by searching for the client.

The screenshot displays the CYSHCN Data System interface. At the top, there are three tabs: HOME, SEARCH, and REPORTS. The SEARCH tab is selected and highlighted with a blue oval and the word "Search". Below the tabs, on the left, is a user menu for "Jane Doe" with a dropdown arrow, the date "Friday, September 23, 2011", and links for "Search" and "Reports". The main content area is divided into two columns. The left column contains the "IDS" logo. The right column has a "Home" link with a house icon. Below this, there is a "Personal Information" section with a dropdown arrow. This section contains two sub-sections: "Personal Information" and "Site Access". The "Personal Information" sub-section lists the following details: Username: jdoe, First Name: Jane, Last Name: Doe, Middle Name: Ann, Email: cjlow625@gmail.com, and Last Changed Password: 9/15/2011 10:24:07 PM. Below these details are two links: "Signed Confidentiality Agreement" and "Update". The "Site Access" sub-section shows the "Site" as "CDPHE Health Care Program for Children w". Below the "Personal Information" section are four more sections, each with a dropdown arrow: "Change Your Password", "Security", "Toolbar Options", and "Manage Favorites".

Personal Information	
Username:	jdoe
First Name:	Jane
Last Name:	Doe
Middle Name:	Ann
Email:	cjlow625@gmail.com
Last Changed Password:	9/15/2011 10:24:07 PM
Signed Confidentiality Agreement Update	

Site Access
Site
CDPHE Health Care Program for Children w

Enter your search criteria and click on **Search**. When the client appears, click on Load.



The screenshot shows the 'Client Search' form. It includes fields for Client ID#, Birth Date, Last Name (filled with 'bear'), ID Types, Phone Number, First Name, and ID. There are checkboxes for 'All Site' and 'All Status'. A 'Relationship Search' section is also present. Callouts indicate where to click: 'Click here to load client record.' points to the 'Load' link in the results table, and 'Click here to search.' points to the 'Search' button.

Client Search

Client ID#: Birth Date: Order: Phone Number: () - ☒ All Site ☒ All Status

Last Name: First Name: ID:

ID Types:

Relationship Search

Type: Last Name: First Name:

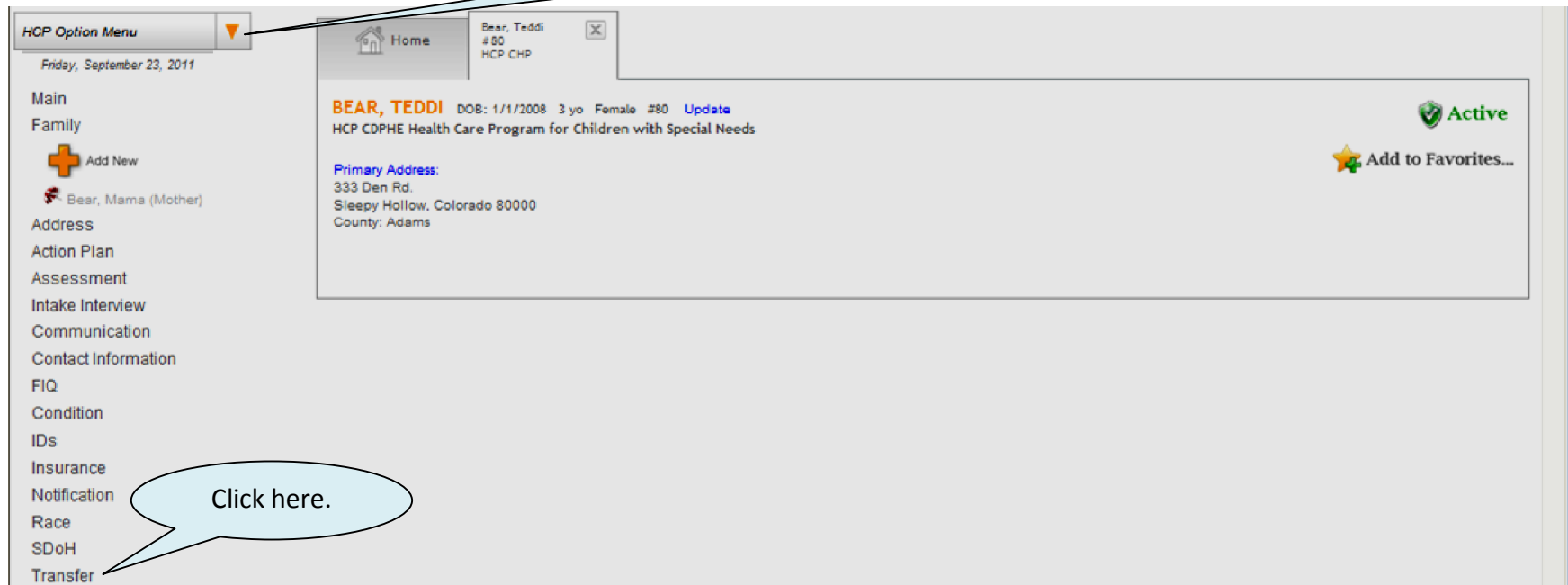
Search Results

	ID	Last Name	First Name	Program	DOB	Relationship	Created By	Status
Load	80	Bear	Teddi	HCP CDPHE Health Care Program for Children with Special Needs	01/01/2008		jdoe	ACTIVE

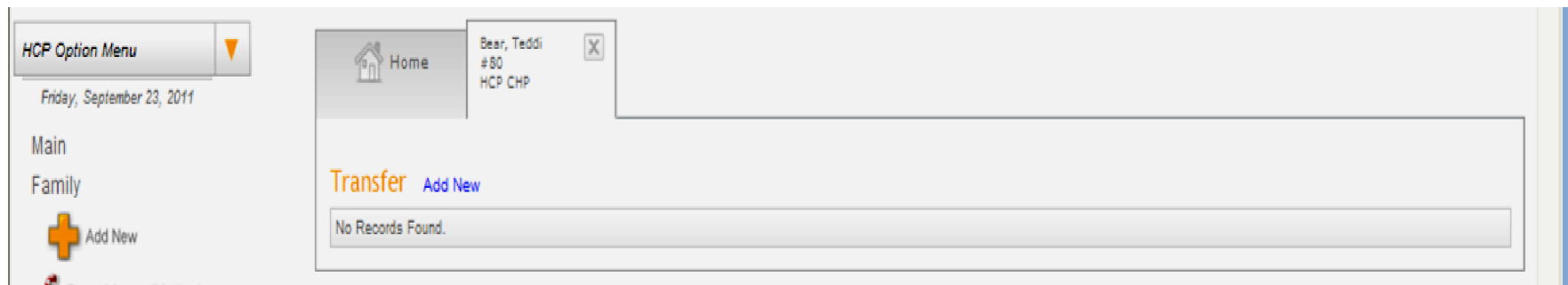
[Close](#)

Select **Transfer** from the **HCP Option Menu**.

HCP Option Menu



Click on **Add New**.



Select the **Transfer to Site** from the **drop down list** and click on **Transfer**.

HCP Option Menu ▼

Pending System Messages

Tuesday, August 30, 2011

Main

Family

Add New

Burton, Rachel S. (Mother)

Address

Contacts

Race

IDs

Communication

Notification

Care Coordination Interview

Action Plan

Assessment

Determinants of Health

FIQ

Insurance

Condition

Transfer

Client Transfer

Transfer From Site: **HCP - Baca County Nursing Service**

Transfer To Site:

- Alamosa County Nursing Service
- Bent County Nursing Service
- Boulder County Public Health
- Broomfield County Health Dept
- CDPHE Health Care Program for Child
- Chaffee County Public Health
- Cheyenne County Public Health
- Clear Creek County Nursing Service
- Community Health Services, Inc.
- Conejos County Nursing Service
- Costilla County Nursing Service
- Crowley County Public Health
- Custer County Nursing Service
- Delta County Health Department
- Denver (DHCP)
- Dolores County Nursing Service
- Eagle County Health and Human Serv
- El Paso County Dept of Health and Er
- Elbert County Nursing Service Kiowa
- Fremont County Nursing Service
- Garfield County Nrsng Srv
- Gilpin County Nrsng Srv
- Grand County Nrsng Srv
- Gunnison County Public Health
- Hinsdale County Nursing Service
- Huerfano Counties District Hlth Dept
- Imagine!
- Jackson County Nrsng Srv
- Jefferson County Department Health

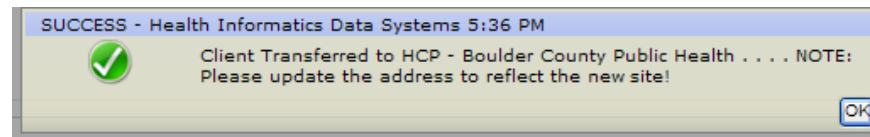
Cancel **Transfer**

HCP

Copyright © 2011 Colorado Department of Public Health & Environment | All Rights Reserved | This system is accurate, that online transactions are secure, and that all material aspects of the site function properly. However, the State makes no warranties...

Click to activate site change.

A success window pops up with a note to update the address for the client. Click the **OK** button to continue. If you know the client's new address, please update it.



Click here to close.

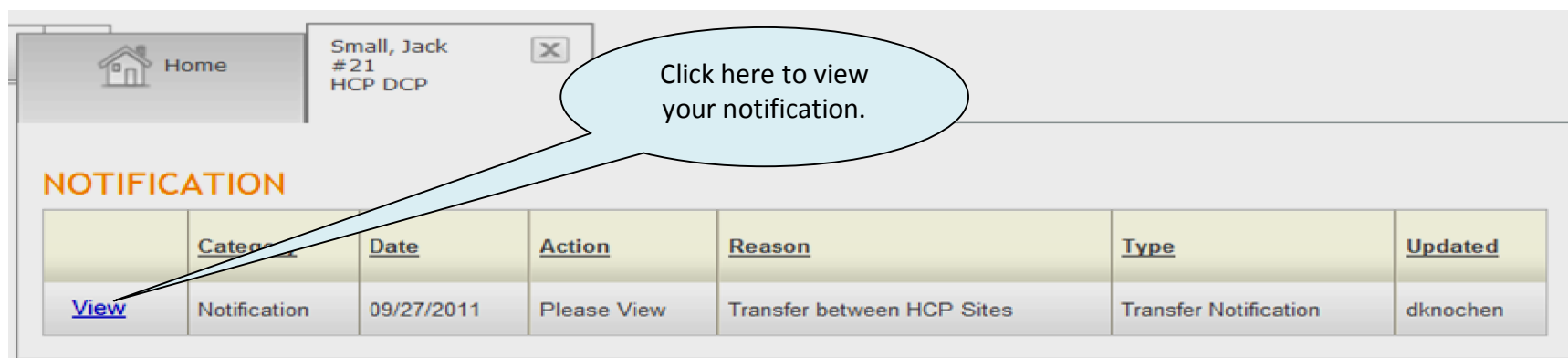
The client is now registered in the new location. The client's new site will receive a notification through a **Pending System Messages** alert.

Receiving a Transferred Client


When a client is being transferred to your site, you will receive a **Pending System Messages**.



Click on the **Pending System Messages** symbol. The following screen will appear.



To open the notification, click on **View**.

 **Pending System Messages** Actions:

	<u>Date</u>	<u>Site</u>	<u>Patient ID</u>	<u>Name</u>	<u>County</u>	<u>Zip</u>
Load	9/27/2011 12:00:00 AM	HCP Alamosa County Nursing Service	21	Small, Jack		

[Close](#)

* Red Rows Indicate System Messages Received in the Last Week

Click Load to view and update the client record.

Now, click Load to see the details of the notification.

Notification

Date: 10/25/2011 [Mark as Viewed](#)

Type: Transfer Notification Source: El Paso County Dept of Health and Environment

Reason: Transfer between HCP Sites Duration: 15 Minutes

Family Member: Result: Successful Transfer

Notes: Transferred From: HCP - El Paso County Dept of Health and Environment
Transferred To: HCP - Boulder County Public Health
NOTE: Please update the address to reflect the new site!

Record Information

Updated: 10/25/2011 5:37:00 PM

Updated By: cjlw

Created: 10/25/2011 5:37:00 PM

[Close](#)

Click here to clear the pending notification.

Verify/Update client's address!

Click on **Mark as Viewed** to clear the notification.

After you have viewed the client, go to **Address** on the **HCP Option Menu** and update the client's address. Make sure that the County is updated to the one in your site's territory. Click on **Add** to save.

The screenshot shows the 'HCP Option Menu' on the left sidebar with a 'Pending System Messages' icon. The main content area is titled 'Address' and contains the following fields:

- Street: Required Field Enter Street
- City: Required Field Enter City
- State: Colorado (dropdown)
- Zip: (text box)
- County: (dropdown)
- Additional Info: (text box)

Callouts highlight the 'County' dropdown and the 'Add' button. A 'Cancel' button is also present. The 'Primary Address' checkbox is unchecked.

Update address from the HCP Option Menu

Make sure County is in your site's territory.

Cancel Add

Appendix I

Security and Confidentiality Agreement Text

Colorado Department of Health & Environment - Data Security, Use and Confidentiality Agreement

In consideration of my access to the Colorado Department of Public Health and Environment secure Web site and information, I agree to the following:

I understand that I am responsible for making every effort to prevent unauthorized users from gaining access to or using my user ID and password. I also agree to make every reasonable effort to prevent use of a computer for illegal or unethical purposes by all users, authorized or not.

I agree to immediately report any suspected or actual unauthorized access to the Colorado Department of Public Health and Environment point of contact that manages the information.

I will not share my password with any other person.

I will not leave my password around my computer or where another person might easily locate it.

I will change my password periodically and if I suspect it has been compromised. I will set up my passwords according to department guidelines for length and content.

I understand that this is a “shared fate” environment. My fellow users and clients may be affected or confidentiality compromised by the activities of other users. Preventing such activity is the shared responsibility of all users. I agree to access only the information I need to do my job and not to access or attempt to access files that I am not authorized to use. I will not “browse” or otherwise use files or programs that exceed what is the minimum necessary to do my job. My use and disclosures of information will be consistent with those permitted by the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other applicable laws and rules. I agree not to discuss confidential information or to provide copies of confidential reports, regardless of how or where acquired, to family members, friends, professional colleagues, other employees, other clients or any other person unless such person has been authorized to have access to that information. If unsure who is

authorized to access the information, I will check with my supervisor or the department point of contact who manages the information. I understand that my access is granted for the purposes of public health and environmental protection. I will not use or disclose any data for any purpose or end inconsistent with the purposes of the system(s) for which access is granted. If I am unsure if any use or disclosure is permitted, I will discuss the issue with my supervisor and/or contact appropriate department program staff for further clarification. I will take precautions to protect confidential data displayed on my screen from viewing by others. This may mean re-positioning my computer screen, adding a device to limit other's view, turning off the computer when leaving the area or enabling password-protected screen savers. I will take reasonable and appropriate steps taking into account the staff and public access to my area and the nature of the data on the system. I understand that files I access may be protected from distribution by copyright or other applicable laws. The department has exclusive copyrights in all original works of authorship created by its employees or contractors. This applies to both published and unpublished works, and includes, but is not limited to, written documents, charts, graphs, imagery and maps. Other entities' copyrighted works also may be accessible on this Web site. I will not reproduce, distribute or display these works without permission from the department or another copyright owner.

I understand that for audit or system security purposes, the department may monitor all my activity.

I understand that the department may revoke my access at any time, with or without cause.

I understand that any violation of federal, state, local or the program's confidentiality requirements of this Agreement will be considered a breach of my obligations and may result in disciplinary action, up to and including termination of employment, termination of contractual relationship and other remedies allowed by law during or after my employment or work with these data systems. For the Department and other state employees, discipline will be per the State of Colorado Personnel Rules.

I understand that information contained in the department's information systems is highly confidential and is protected from improper use and disclosure by applicable federal and state laws. I agree not to disclose confidential information in violation of this agreement or applicable confidentiality laws.

Signed By: <CYSHCN User Name>

Date Signed: <Date Agreed>

Appendix II

HCP Care Coordination Model Flow Chart

